

REGIMENTAL DOCUMENTS

NAME AITKEN. George

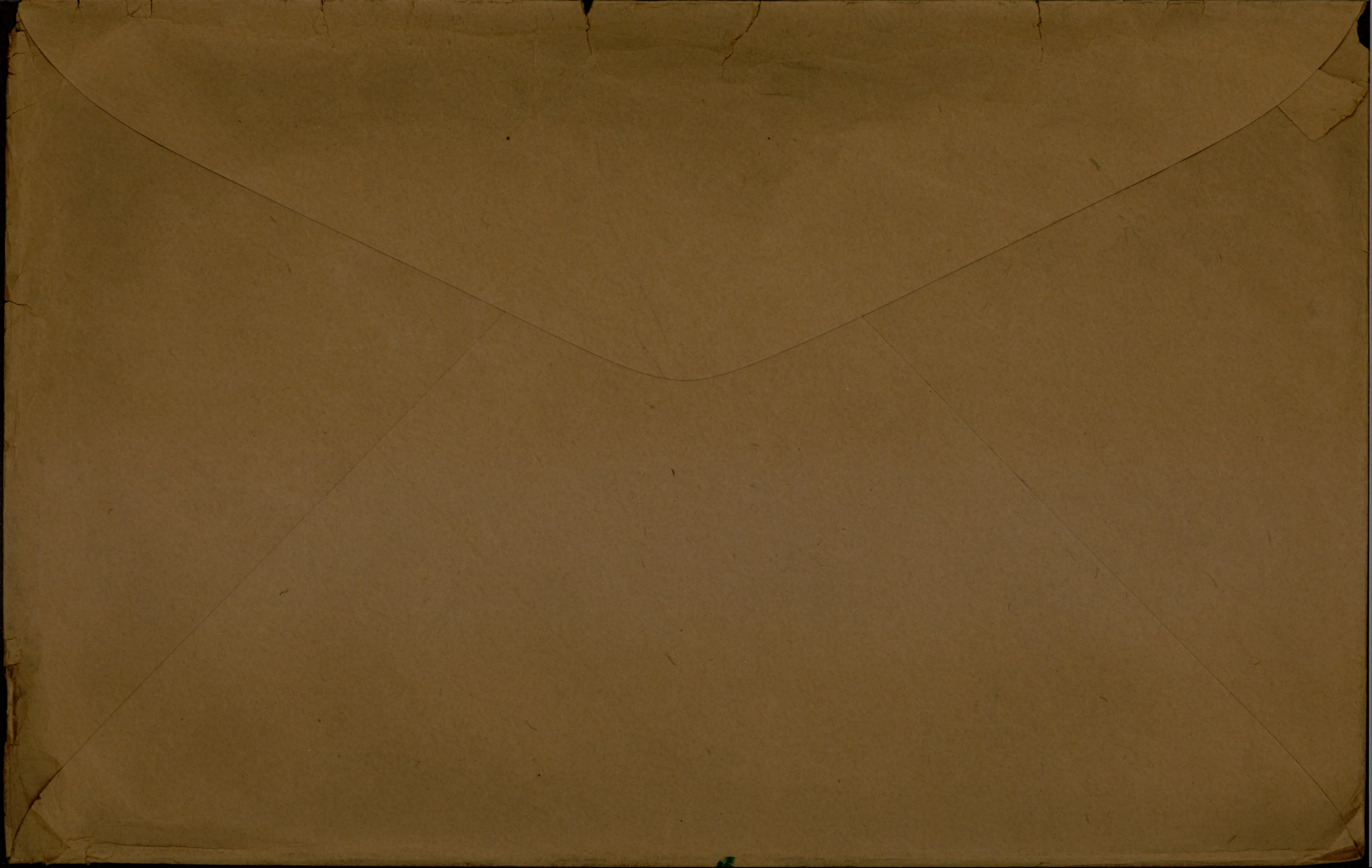
REGT. NO. 85650

UNIT 3^d Res Batty H. Q. FILE NO. 3151

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H

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
3 ATTESTATION PAPER (M.F.W. 23, 133, or 51)		<div style="border: 1px solid black; border-radius: 50%; width: 40px; height: 40px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> <div style="border: 1px solid black; border-radius: 50%; width: 20px; height: 20px; display: flex; align-items: center; justify-content: center;"> M </div> <div style="border: 1px solid black; border-radius: 50%; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center;"> <div style="border: 1px solid black; border-radius: 50%; width: 20px; height: 20px; display: flex; align-items: center; justify-content: center;"> H </div> </div> </div>			DEATH
/ CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
/ TRAINING HISTORY SHEET (M.F.W. 113) <i>Record sheet</i>					<i>Died 12-10-16</i>
/ FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.B.W. 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)					DISCHARGE
					Category
2 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
MEDICAL EXAMINATION (M.F.W. 129)					
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)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
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)					
4 <i>Misc Cards</i>					
<i>Pay sheets</i>					



Original

ATTESTATION PAPER.

No. ~~117~~

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio. *85650*

QUESTIONS TO BE PUT BEFORE ATTESTATION. (ANSWERS).

1. What is your name?..... *George Aitken*
 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?..... *George Aitken (father)*
 4. What is the address of your next-of-kin?..... *236 McPhar St Hamilton, Ont.*
 5. What is the date of your birth?..... *28th July 1895*
 6. What is your Trade or Calling?..... *Laborer*
 7. Are you married?..... *No*
 8. Are you willing to be vaccinated or re-vaccinated? *a inoculated*..... *Yes*
 9. Do you now belong to the Active Militia?..... *No*
 10. Have you ever served in any Military Force?..... *No*
If so, state particulars of former Service.
 11. Do you understand the nature and terms of your engagement?..... *Yes*
 12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?..... *Yes*
- *George Aitken* (Signature of Man).
 *Wm. Frawley* (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

..... *George Aitken* (Signature of Recruit)
 Date..... *Feb 8* 191*6* *Wm. Frawley* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *George Aitken*, 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.

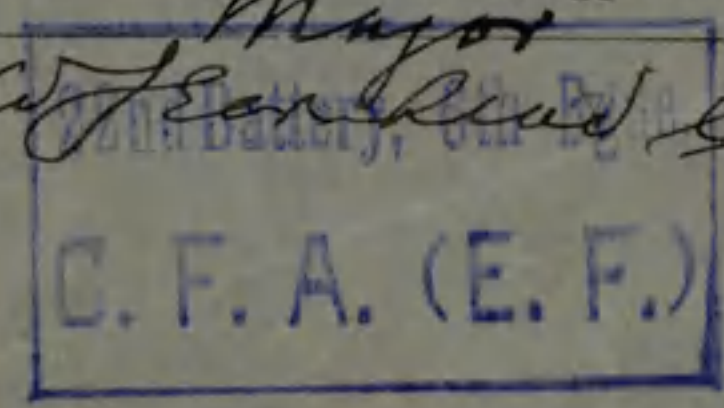
..... *George Aitken* (Signature of Recruit)
 Date..... *Feb 8/15* *Wm. Frawley* (Signature of Witness)

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 *Kington, Ont.* this *8th* day of *February* 191*6*
 *Wm. Frawley* (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.
 *W. R. Peardon* (Approving Officer)
Major
per W. Frawley

M. F. W. 23.
 150 M.-12-14.
 H.Q. 1772-20-241.



Description of George Aitken on Enlistment

Apparent Age 19 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. 7 1/2 ins.

Chest measurement { Girth when fully expanded 35 ins.
 Range of expansion 2 1/2 ins.

Complexion Dark

Eyes D. Blue

Hair Black

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

Mole little to right of center line
 Small birthmark on left scapular region.

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 Feb 8th 191 5

Place Kingston

R. Richardson
Lieut AMC
 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 Aitken 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. J. Frankland (Signature of Officer)

Date Feb 10 191 5

Major
W. J. Frankland
 22nd Battery, 6th Bgde.
 C. F. A. (E. F.)

MEDICAL HISTORY SHEET.

Surname Aitken Christian Name George V. Menee

Examined { on 8th day of Feb 1915
at Kingston
Birthplace { City or Town London
County England

Approved by R. S. Richardson
Rank Lieut. AMM M.O.

Apparent age 19 yrs 6 months
Trade or occupation labourer
Height 5 Feet 7 1/2 Inches.
Weight 150 Lbs.
Chest measurement { Minimum 33 inches.
Maximum expansion 35 inches.
Physical development good
Small-Pox Marks none

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

Vaccination Marks { Arm Right. Left.
Number three
When Vaccinated last childhood
(a) Marks indicating congenital peculiarities or previous disease mole none

Date	Result	VACCINATIONS.
<u>3/24/15</u>	<u>Good</u>	<u>M. S. Shaw</u> M.O.
<u>24/3/15</u>	<u>Good</u>	<u>R. S. Richardson</u> M.O.
		M.O.

Small birthmark l. gluteal region.
(b) Slight defects but not sufficient to cause rejection
Teeth 2 out & 3 defective
Left foot slightly flat.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>22/2/15</u>	<u>Good</u>	<u>W. R. Maclean</u> M.O.
<u>4/3/15</u>	<u>Good</u>	<u>W. R. Maclean</u> M.O.
		<u>J. S.</u> M.O.

Enlisted on 8th day of February 1915 at Kingston, Ont.

CORPS.	REG'T'L NUMBER.	HABITS.	DATE.
<u>22nd Battery, 6th Bgde.</u>	<u>147</u>		<u>Feb 5/15</u>
<u>C. F. A. (E. F.)</u>	<u>85324</u> <u>85650</u>		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

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

Entries in Red Ink made from Attestation Sheets
R. M. Shaw
for D. D. M. S.

JUL 31 1915

original

No. ~~85511~~ Name *Atkin, Geo V.* Sqn., Batty., or Company *210th Corps Reserve* Date of enlistment *5/2/15* G. Badges *3* Service or Proficiency Pay *100*
 8565110 Date of last entry in Company Conduct Sheet *no country sheet* No. and date of last drunk *12-10-16* Period not reckoning towards freedom from extra fine *12-10-16* Sheet No. *one* Signature O.C. Company, etc. *Alhman capt* Character *capt*

Place	Date of offence	Rank	Cases of drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
		<i>1st Lt.</i>		<i>Transferred to 210th</i>				<i>W. R. Rindow</i>	
				<i>Did of injuries accidentally rec'd 12-10-16</i>					

Army Form B. 122

[F.T.O.]

Place	Date of offence	Rank	Cases of drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks

7434

14.

W I L L.

In event of my death I
leave the whole of my
property to my mother

George V. Aitken.

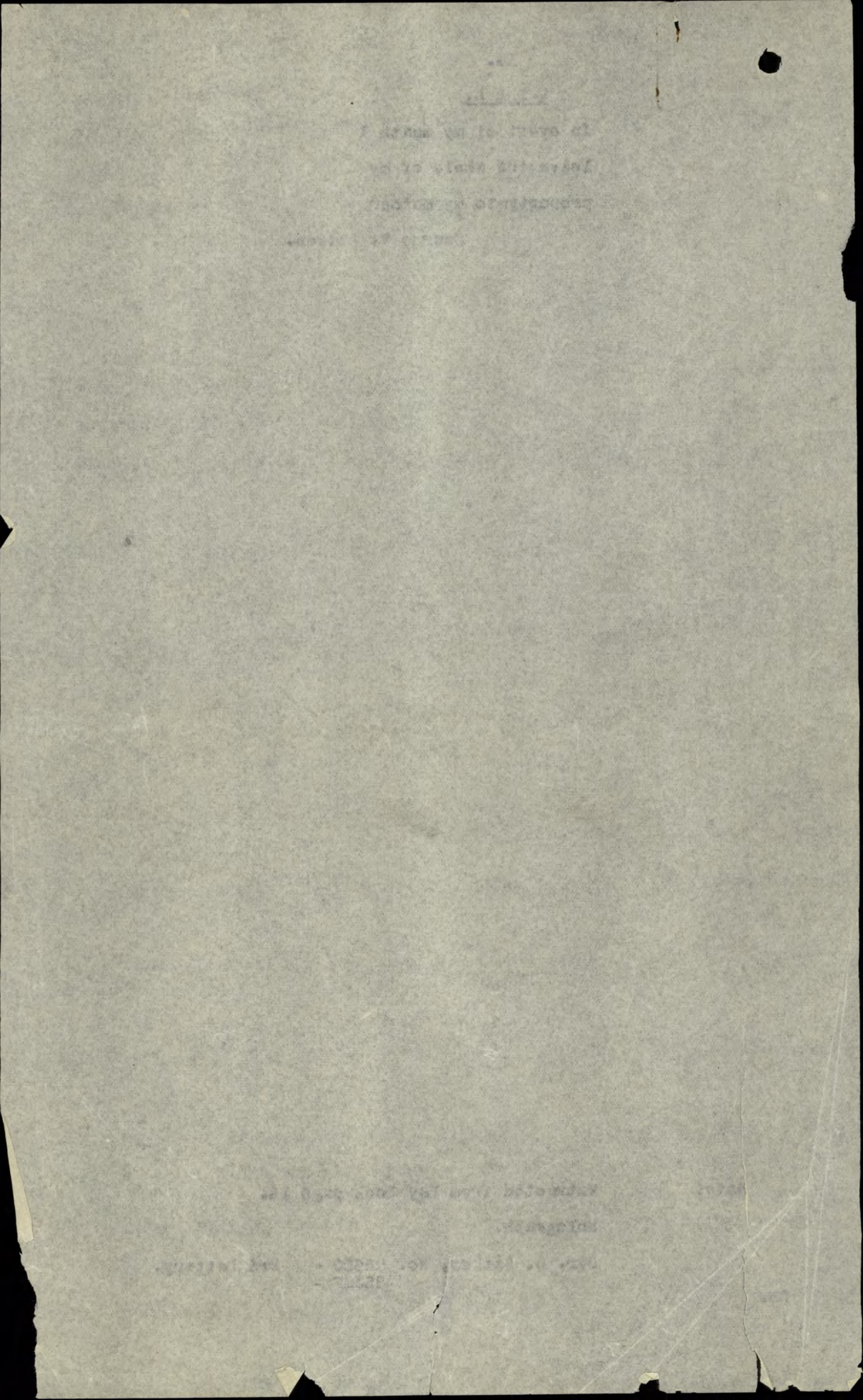
Note.

Extracted from Fay Book page 14.

Holograph.

Dvr. G. Aitken, No. 85650 - 3rd Battery.
85327 -

BM.



Rank and Name AITKEN, George.

Regimental No. 85650.

Unit 6th. Bde. C.F.A.

Date of enlistment Feb. 8th 1915.

Place of birth London, Eng.

Married (Yes or No) No.

If in Permanent Force

Promotions or appointments

Name and Address of Next-of-kin

George Aitken, (Father)

236 McNab Street,

Hamilton, Ont. Canada.

Date and place of discharge

Reason for discharge

Character on discharge

Apr. 12 Bde

Envelope 10998

R6

RL 75 A 794

MA

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				
17.5.15	OC Res Bde	Drafted to France	Shorncliffe	13.5.15	Part II. O#50 Para 140.
22-5-15	of 1. Bde Jan 4 1915	Taken on strength D.A.C.	France	13.5.15	Part II O# 13
7.2.16	of 1. Bde	Attached to H.Q. Div Train	"	16.1.16	" " 7
14.2.16	" "	Granted 9 days leave from	"	30.1.16	" " 8
" "	" "	Returned to unit from Div Train	"	27.1.16	" " 8
7.7.16	" "	Posted to 12 th A Bde.	"	28.6.16	" " 29
" "	of 1. Bde	Taken on strength 12 th A Bde	"	29.6.16	" " 1
19-9-16	" "	To No 44 Field Amb	"	2-9-16	C. L. A. 34 Int. Lineal Member
29.10.16	" "	Died of injuries accidentally received		10/10/16	P-1059. C.L.A. 61 4/11/16

Rank and Name

Report

Date

From whom received

Record of promotions, reductions, transfers, casualties, etc, during active service. The authority to be quoted in each case.

Place

Date

REMARKS
Taken from Official Documents

Place of birth
Married (Yes or No)
In Permanent Force
Promotions or appointments
Report

REMARKS
Taken from Official Documents

Date

Record of promotions, reductions, transfers, casualties, etc, during active service. The authority to be quoted in each case.

From whom received

Date

KG/102/315 *Casualty Form Active Service* *Records R2-2-38-91*

(1001)—Wt. W8203—1278.—800,000.—11-14.—K. & K. Forms B. 103/1.

R2-14816

Army Form B. 103.

Casualty Form—Active Service.

Regimental No. ^{Loans} ~~85394~~ ⁴⁵⁶⁵⁰ 85394 Rank Gr. Name Witken Leo ^{Loans}
 Enlisted (a) 5/2/15 Terms of Service (a) Duration War Service reckons from (a) 5/2/15
 Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N.C.Os. }
 Extended _____ Re-engaged _____ Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
<i>Transferred to draft 12-5-15</i>					
<i>Adj. Linn Capt</i>					
<i>6th F. A. Ede. G. E. F.</i>					
15-5-15	<i>D.C. D.A.C. 941</i>	<i>Transf. to D.A.C.</i>	<i>In the field</i>	15-5-15	
22-1-16	"	<i>attached Hq. Co. Div. Train</i>	"	16-1-16	<i>B 213. Pt II 0 d/- 7-2-16.</i>
5-2-16	"	<i>granted 9 days leave</i>	"	30-1-16	<i>" B 213 0 / 14-2-16.</i>
29-1-16	"	<i>Rejoined</i>	"	27-1-16	"
30-3-16	"	<i>Returned from leave.</i>	"	9-2-16	<i>158/ant/5/33</i>
28-6-16	1st C.D. A.Hq.	Posted to 12th C.F.A. Bde.	"	28-6-16	<i>A.H.Q. 9-62. Pt. 2. O. No. 27 d/- 7-7-16.</i>
29-6-16	do	Taken on 12th Ede C.F.A on organization.	"	29-6-16	<i>A.H.Q. 9-62 Pt 11 0, 1, 7-7-16 O.B. 818 d/ 2-5-16 A.G.D/ 1794 d/ 25-5-16</i>

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
10-9-16.	77 Fa 77 Fa	Inf. Sinores. membrane.	47. 7th amb.	2-9-16.	1736. D.S. # 5021613-9-16
24-9-16 15-10-16.	Obit 37 Fa.	returned from hospital Contusion abdomen (accid) (died.) Died	field 37 Fa.	24-9-16 12 18-10-10.	B 213 936. Pt. II. D.O. ⁵⁹ 29 ²⁹ 10.16.
			"	17/10/16.	Pt. II. Ambler LIEUT. OFFICER in RECORDS CANADIAN SECTION G.H.Q. 8th ECHELON

NAME AITKEN, George, *Sm. ✓*

Regimental No. 85650

Name and address of next-of-kin

Unit 6th Bgde C F A 12th

George Aitken, - Father

Date of enlistment Feb. 8th. 1915

236 McNab Street,

Place of BIRTH London, England,

Hamilton, Ont. Canada

Married (yes or no) No

Date and place discharged

Amount of pay assigned monthly \$ 10⁰⁰

Reason for discharge Died of Wounds 12/10/16
Entered on N.E. Card Index. Checked by J.F. McNeilland.

To whom payable Elizabeth Aitken
As above.

Character on discharge C.P.A. 60d 30/10/16



Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						
1 ³ / ₁₅	31 ³ / ₁₅	31	1 ⁰⁰	31	31	10	3 10		34 10			22 50	10	45	32 95	1 15	NOT LAUNDRY
1 ⁴ / ₁₅	30 ⁴ / ₁₅	30	1 ⁰⁰	30	30	10	3		33			22 50	10	60	33 10	1 05	"
1 ⁵ / ₁₅	31 ⁵ / ₁₅	31	1	31	31	10	3 10		34 10				10	50	10 50	24 65	"
1 ⁶ / ₁₅	30 ⁶ / ₁₅	30	.	30	30	.	3		33			8 50	10	18 60	39 15	D.A.C. 17 1/2	
1 July	31 July	31	1 ⁰⁰	31	31	10	3 10		34 10			9	10	19	54 25		
								1 67				67 50			19	56 92	Each 1.67 added.
1 st Aug	31 st Aug	31	1 ⁰⁰	31	31	10	3 10		90 02			11 14	10		21 14	60 88	
1 st Sept.	30 th Sept.	30	1	30	30	10	3		33			9 82	10		19 82	82 06	
1 st Oct.	31 st Oct.	31	1	31	31	10	3 10		34 10			10 46	20		30 46	85 40	Assign me to 20.
1 Nov.	30 Nov.	30	1	30	30	10	3		33			14 28	20		34 28	84 42	
1 Dec. 1916	31 Dec.	31	1	31	31	10	3 10		34 10			12 21	20		32 21	86 31	
1 Jan.	31 Jan.	31	1	31	31	10	3 10		34 10			81 42	20		101 42	18 69	
1 Feb.	29 Feb.	29	1	29	29	10	2 90		31 90			5 23	20	3 12	28 36	22 24	Not scanned by P.O. Office Victoria on 24/6/67. Checked by J.F. McNeilland London to Bologna.
1 Mar.	31 Mar.	31	1	31	31	10	3 10		34 10			5 23	20		25 23	31 11	
												212 59	190	2 12	407 26		

Cash found in effects 61¢

Carried forward to Large Ledger sheet

4.67 Checked... *As King*
Seal

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

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

Sheet No. 2.

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

W Eliza Aitken

PAYMENTS.

Name of Soldier

Aitken G.

438

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	<i>a 55</i>	<i>20</i>	
May		<i>B 1285</i>	<i>20</i>	
June		<i>M 9377</i>	<i>20</i>	
July		<i>C 8115</i>	<i>20</i>	
Aug.		<i>a 11169</i>	<i>20</i>	
Sept.		<i>B 15274</i>	<i>20</i>	
Oct.		<i>B 19608</i>	<i>20</i>	
Nov.		<i>B 24554</i>	<i>20</i>	<i>Spec. Reg. A-12-16 L</i>
Dec.		<i>W 29954</i>	<i>20</i>	<i>Acct closed. CWS</i>
Jan.	1917			<i>Dec chq 20⁰⁰ to adj for Nov</i>
Feb.				<i>Acct closed Dec/16 JG</i>
March				<i>Casualties</i>
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

20⁰⁰

22-ud BHy

*Hand
advised*

P. X. Rend. Date *total \$35.00*
 P. X. " *27-8-17* P.M.

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

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

*Reuf.
M*

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

437

Wm

To Whom *Wm Eliza Aitken*

By Whom Assigned *Aitken G.*

Address ~~*236 Mc Nab St.*~~
~~*219 Stanley St.*~~
~~*Simcoe*~~ *Hamilton Ont.*

Regtl. No. *# 856.50 CAS*

Rank *St.*

Corps *22nd Battery C.E.F.*

*130 Walseley St.
Toronto.*
Rate ~~*\$10.00*~~ *\$20.00 Oct. 1/15.*
a res from War 1st

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>Stop payments "Died of injuries" 3m 7¹¹/16 - 3¹²/16 Dec 1/16</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			<i>Serv of Wounds Oct 12¹¹/16 to 15³/16 Casualties \$20.00 Future 2^m W/h 299/15.</i>
Feb.				
March		<i>A7084</i>	<i>10</i>	
April		<i>B7503</i>	<i>10</i>	
May		<i>B8435</i>	<i>10</i>	
June		<i>A9802</i>	<i>10</i>	
July		<i>J5098</i>	<i>10</i>	
Aug.		<i>J5924</i>	<i>10</i>	
Sept.		<i>H612923</i>	<i>10</i>	
Oct.		<i>J9299</i>	<i>20</i>	
Nov.		<i>G15382</i>	<i>20</i>	
Dec.		<i>F14465</i>	<i>20</i>	
Jan.	1916	<i>E15910</i>	<i>20</i>	
Feb.		<i>D18333</i>	<i>20</i>	
March		<i>C18798</i>	<i>20</i>	



Handwritten text, possibly a date or signature, appearing as a series of dark, irregular marks.

Handwritten text, possibly a date or signature, appearing as a series of dark, irregular marks.

Small handwritten mark or character.

Small handwritten mark or character.

Small handwritten mark or character.

Surname

Christian Name or Names

Reg. No.

Aitken

G.

85650

Rank

Unit

Co.

Troop

Batty.

Sgt.

12th Bde. C. F. Amb

Hospital

Date of Admission

Transferred

#17 3rd La. Amb

Hosp.

2.9.16

Hosp.

Hosp.

Hosp.

Diagnosis

(1)

Inf Synovial Membrane

Later Diagnosis (if changed)

(2)

(3)

Dead of wounds, accidental, 12.10.16.

Additional Diagnosis: if more than one state present

A.M.D. 2 DEPT.

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

DISPOSITION

Date

d. 19.9.16 #2/34

v. 11.16. 461.

REMARKS

Handwritten initials/signature in bottom right corner.

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

NAME

Aitken, George

REGT'L. No. 85650

RANK AND CORPS

Gnr.

12th Bde. C. F. A. (22nd Regt. C.F.A.)

CABLE

NO.

DATE

NATURE OF CASUALTY

6th Bde.

O 4142

3-11-16

C

Died at "37" Field Amb. Oct. 12th 1916
accidental injuries

B 20900

28-10-16

Rouen

Died of injuries - accidentally received
12-10-16 - #377d. Amb. B.C. F. France

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

A 34 #77. 7d. Amb

2-9-16

sinusoidal meningitis

A 61. #37 7d. Amb.

12-10-16

Healed of wounds, accidental

H.A.Y. ✓

AITKEN. Gr. George. #85650. 649-A-2452.

Elig for 14/16-star.

MEDALS: Mrs. E. Aitken (Mother)
130 Wolseley St.,
Toronto, Ont.

M

PLACQUE: Mr. George V. Aitken (Father)
(*Serial no. 779388*) address as above.

C. of S. Mother as above.

Scroll Desp. FEB 11 1921 Reqn. No. 2-18993

Plaque Desp. JAN 3 1922 Reqn. No. PG 2211

9 2/20

OK

C. 1316.

Name AITKEN, George Rank Gnr.

Reg. No. 85650

Unit 12th. Brigade, C.F.A.

P. L. 25-A-794.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1916.			Membrain.			
2-9.	No. 77. Field Ambulance.	Inf. Sineoreal		A34		
12-10.	Died at No. 37. Gen Field. Amb.		do	A.61.		

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

MARRIED OR SINGLE *S.*
 PLACE OF BIRTH *London Eng.*
 NAME AND ADDRESS OF NEXT OF KIN *Sergt Aitken
 236 McFar St. Hamilton Ont.*
 RELATIONSHIP OF NEXT OF KIN *Father*
 NAME AND ADDRESS OF NEXT OF KIN
 RELATIONSHIP OF NEXT OF KIN
 SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)
 PAYABLE TO
 RELATIONSHIP OF DEPENDANT

COMPILED BY *F.S.P.*
 CHECKED BY *F.S.P.*

CASUALTIES, PROMOTIONS, &c.		
PARTICULARS	EFFECTIVE DATE	AUTHORITY
<i>Dead of Wounds</i>	<i>12/10/16</i>	<i>62260 d. 30/10/16</i>

ADMISSIONS TO HOSPITAL, &c.			
DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L. No. *85650.* RANK *Smt.* NAME *Aitken George*
 UNIT *6th Bgds C.F.A.* TRANSFERRED TO *1st Bn C.* DATE *1-7-15.* AUTHORITY
 IF IN PERM. CORPS; WHAT UNIT
 PERMANENT FORCE ALLOWANCES TRANSFERRED TO *12th Bn A. Bde* DATE *16/7/16* AUTHORITY *P.O. #27*
 PLACE OF ATTESTATION TRANSFERRED TO *non-effective* DATE *13-10-16* AUTHORITY *C.P. 60,341*
 DATE OF ATTESTATION *Feb 8th 1916* TRANSFERRED TO DATE AUTHORITY *m P.B.*
 ASSIGNED PAY MONTHLY \$ *10 Inc to \$20.* DATE EFFECTIVE *1st March 1915.* Changed. *1st Oct. 1915*
 PAYABLE TO *Elizabeth Aitken. 236 McFar St. Hamilton. Ont.* RELATIONSHIP
 ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE
 PAYABLE TO
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *3/11/16* EFFECTIVE *Dec. 1, 1916* REASON *"Died of Injuries" D.O.S. 12-10-16*
 DISCHARGE DATE AND PLACE *17/10/16* REASON AND AUTHORITY
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) *13. 10. 16.*
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)



Entered on N.E. Card Index
 Checked by *J. McCalland*
 REASON *"Died of Injuries" D.O.S. 12-10-16*

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS			
	No. OF DAYS	RATE	AMOUNT		No. OF DAYS	RATE	AMOUNT		No. OF DAYS	RATE	AMOUNT					1	2	3	4	1	2	3	4	ASSIGNED PAY	OTHER CHARGES				TOTAL DEBITS	CREDIT	DEBIT
			\$	C.			\$	C.			\$	C.																			
<i>1916 April 1-30</i>	<i>30</i>	<i>1.00</i>	<i>30</i>		<i>30</i>	<i>10</i>	<i>3</i>														<i>212</i>	<i>59</i>	<i>190</i>	<i>467</i>	<i>407</i>	<i>26</i>	<i>31.11</i>				
<i>May 1-31</i>	<i>31</i>	<i>1.00</i>	<i>31</i>	<i>30</i>	<i>10</i>	<i>3</i>	<i>10</i>						<i>450</i>	<i>450</i>							<i>5.23</i>	<i>2.56</i>	<i>2.0</i>	<i>28</i>	<i>23</i>	<i>38.88</i>					
<i>June 1-30</i>	<i>30</i>	<i>1.00</i>	<i>30</i>	<i>30</i>	<i>10</i>	<i>3</i>	<i>00</i>						<i>795</i>	<i>795</i>							<i>2.55</i>	<i>2.61</i>	<i>20.</i>	<i>30</i>	<i>28</i>	<i>42.70</i>					
<i>July 1-15</i>	<i>15</i>	<i>1.00</i>	<i>15</i>	<i>15</i>	<i>10</i>	<i>1.50</i>							<i>16</i>	<i>50</i>							<i>2.56</i>	<i>2.61</i>	<i>20.</i>	<i>25</i>	<i>17.</i>	<i>50.53</i>					
<i>16-31</i>	<i>16</i>	<i>1.00</i>	<i>16</i>	<i>16</i>	<i>10</i>	<i>1.60</i>							<i>17</i>	<i>60</i>									<i>20.</i>	<i>20</i>	<i>47.03</i>						
<i>Aug 31</i>	<i>31</i>		<i>31</i>	<i>31</i>		<i>3.10</i>							<i>34</i>	<i>10</i>							<i>20.</i>		<i>20</i>	<i>78</i>	<i>73</i>		<i>78.73</i>				
<i>Sept 30</i>	<i>30</i>		<i>30</i>			<i>3</i>							<i>33</i>								<i>20.</i>	<i>2.61</i>	<i>20.</i>	<i>33</i>	<i>95</i>	<i>77.78</i>		<i>78.73</i>			
<i>Oct 31</i>	<i>31</i>		<i>31</i>	<i>31</i>		<i>3.10</i>							<i>34</i>	<i>10</i>	<i>34.19</i>						<i>20.</i>	<i>2.61</i>	<i>20.</i>	<i>51</i>	<i>36</i>	<i>60.52</i>	<i>41.20.90</i>	<i>overpaid 19 days in Oct. Died of Inj. 17/10/16 D.O.S. 12-10-16</i>			
<i>Nov</i>													<i>67</i>	<i>17</i>	<i>67.17</i>						<i>5.23</i>	<i>5.23</i>	<i>20.</i>	<i>20</i>	<i>90</i>	<i>51</i>	<i>36</i>	<i>60.52</i>	<i>Paid to non-eff. 4/11/16</i> <i>A. 3 from eff. Dec. 1. 1915</i>		
													<i>61</i>	<i>61</i>	<i>61</i>						<i>30</i>	<i>30</i>	<i>20.</i>	<i>63</i>	<i>3</i>	<i>40.52</i>		<i>41.13</i>	<i>Stop</i> <i>Balance transferred to N. E. Branch 3/3/16</i>		
																								<i>41</i>	<i>13</i>	<i>41</i>	<i>13</i>		<i>41.13</i>	<i>D:41.13 to Old for ad. 19/12/16</i>	



Small Ledger Book

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

Date	Brief details, and signature
24.3.15.	Vaccs. W. R. MacLean.
22.2.15.	Inocs. do.
4.3.15.	

Table IV.—Service Table.

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



85650
DUPLICATE
Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only, Army Form B. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Aitken Christian Name George Vallence

TABLE I.—GENERAL TABLE.

Birthplace ... Parish London County England

Examined ... on 8th day of Feb. 1915 .
at Kingston

Declared Age ... 19 years 6mths days.

Trade or Occupation ... Labourer

Height ... 5 feet, 7½ inches.

Weight ... 150 lbs.

Chest Measurement { Girth when fully Expanded. 33 inches.
Range of Expansion. 35 inches.

Physical Development ... Fair
Right Left

Vaccination Marks { Arm ...
Number ... 3

When Vaccinated ... Childhood

Vision ... { R.E.—V=
L.E.—V=

(a) Marks indicating congenital peculiarities or previous disease ... { (a) Mole
small birthmark L. gluteal region

(b) Slight defects but not sufficient to cause rejection ... { (b) Teeth 2out, 3defective
Left foot slightly flat.

Approved by (Signature) R.B. Richardson
(Rank) Lieut. A.M.C.
Medical Officer.

Enlisted ... at Kingston Ont.
on 8th day of Feb. 1915 .

Corps.	Regtl. No.
<u>22nd Batt. 6th Bgde, C.F.A. (E F)</u>	<u>85650</u>

Became non-effective by ...
on _____ day of _____ 191 .
(Signature) _____
(Rank) _____

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