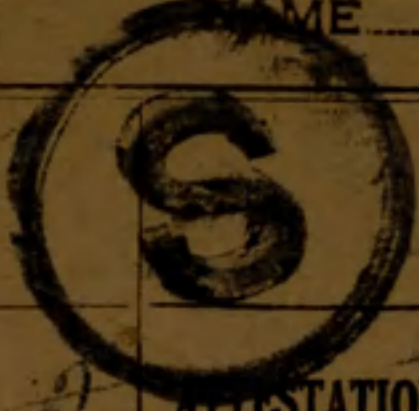


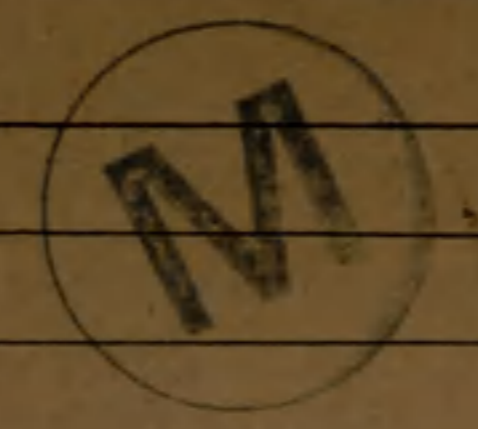
NAME **ANDERSON, GEORGE BLINNARD** REGT. NO. **3346930** UNIT **184th Bn** H. Q. FILE NO.



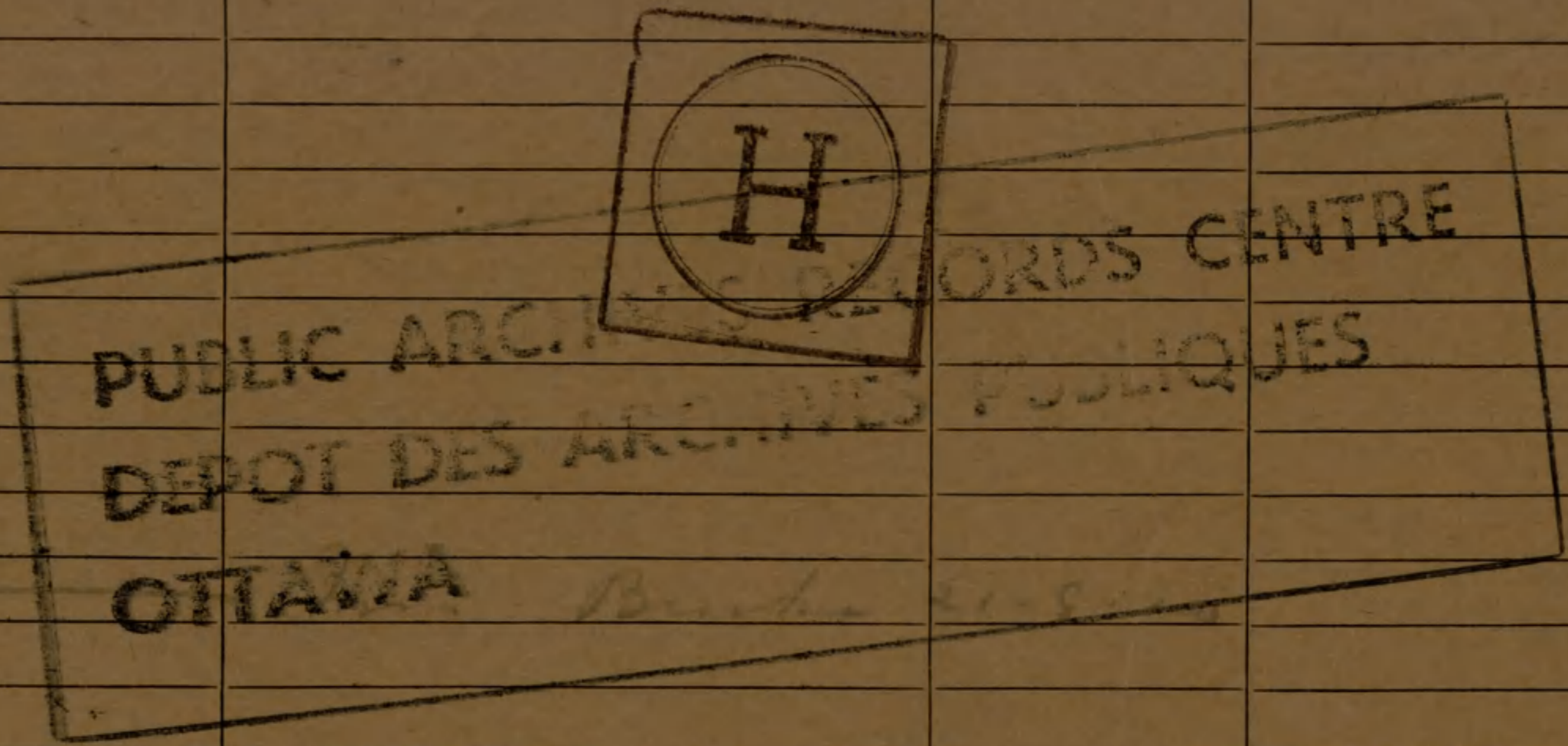
CONTENTS

DATE RECEIVED TO WHOM FORWARDED DATE FORWARDED M. F. W. 2505 REFERENCE NON-EFFECTIVE BY

- 4 / ATTESTATION PAPER (M.F.W. 23, 133, or 51) 4
- 1 / CASUALTY FORM (M.F.W. 54 or A.F.B. 103)
- 1 / TRAINING HISTORY SHEET (M.F.W. 113) *train sheet*
- 1 / FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)
- 1 / REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)
- 1 / COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)
- 1 / MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)
- 1 / DENTAL HISTORY SHEET (M.F.B. 465)
- 1 / MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)
- 1 / MEDICAL EXAMINATION (M.F.W. 129)
- 1 / TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)
- 1 / PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)
- 1 / DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)
- 1 / LAST PAY CERTIFICATE (M.F.W. 44)
- 1 / PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)
- 1 / PARTICULARS OF CHARACTER (A.F.W. 3226)
- 1 / COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)
- 2 / *823*
- 1 / *3rd 12/650091*
- 1 / *pay sheet*



Medical Certificate



DEATH

Category

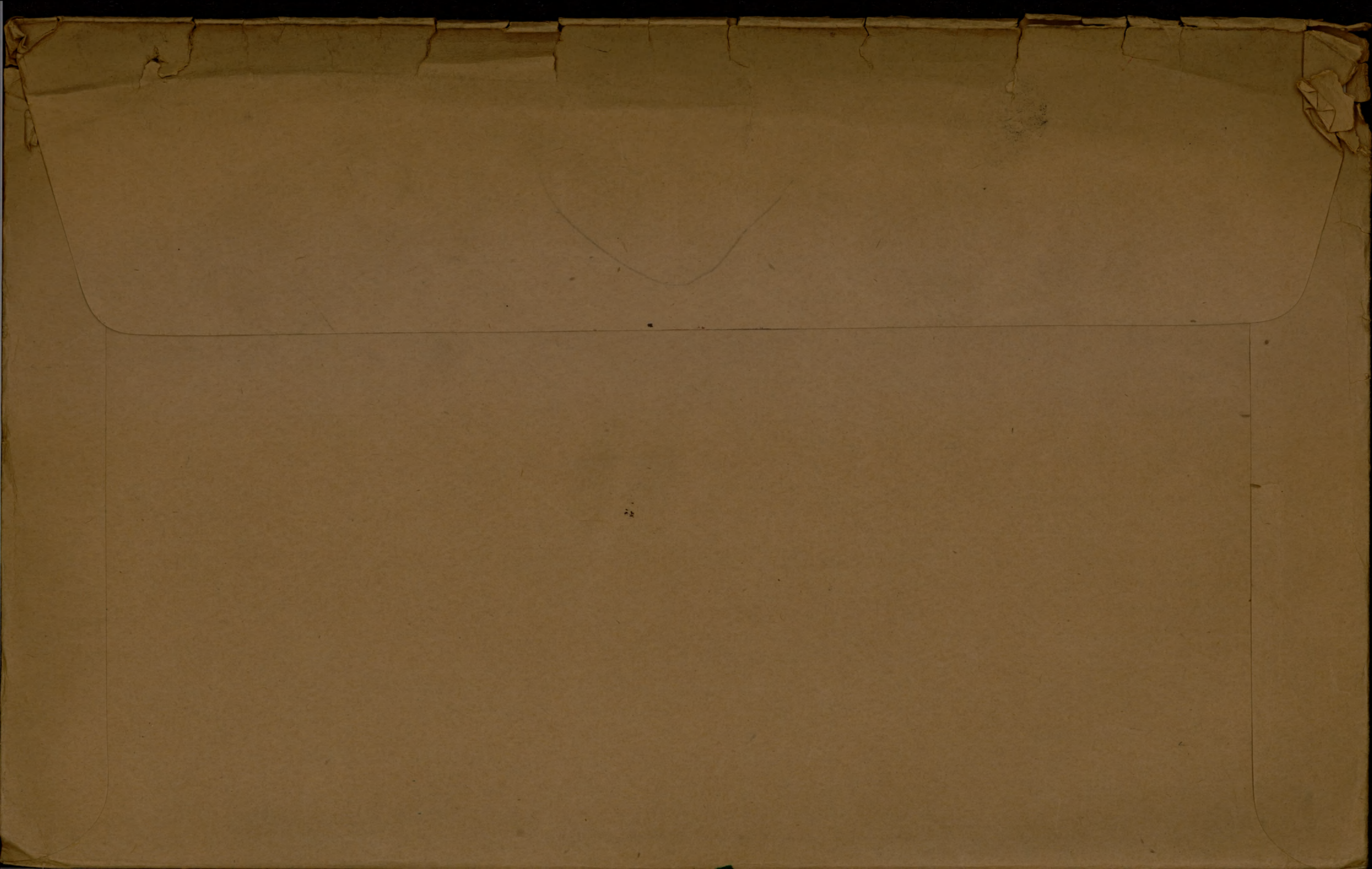
DISCHARGE

Category

29 emol

DESERTION

402023



ORIGINAL

No 10 M. D. First Depot Battalion Manitoba Regiment

Regtl. No D3346930

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class One)

- 1. Surname Anderson
2. Christian name George Blennerd Beirnes
3. Present address Irma P.O. Alberta Canada
4. Military Service Act letter and number 534471JC
5. Date of birth 13th January 1897
6. Place of birth Sossigirth manitoba canada
7. Married, widower or single Single
8. Religion Methodist
9. Trade or calling Farmer
10. Name of next-of-kin Mrs Louise Anderson
11. Relationship of next-of-kin Mother
12. Address of next-of-kin 699 Fleet Avenue Winnipeg manitoba canada
13. Whether at present a member of the Active Militia No
14. Particulars of previous military or naval service, if any None
15. Medical Examination under Military Service Act:—
(a) Place Winniepeg Canada (b) Date 4th June 1918 (c) Category A2

DECLARATION OF RECRUIT

I, George Blennerd Beirnes Anderson, do solemnly declare that the above particulars refer to me, and are true.

George Blennerd Beirnes Anderson (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 21 yrs 5 mths.
Height 5 ft 7 ins.
Chest measurement fully expanded 37 ins. range of expansion 32 1/2 ins.
Complexion Ruddy
Eyes L. Blue
Hair D. Brown
Distinctive marks, and marks indicating congenital peculiarities or previous disease. Scar right cheek Mole left arm Birth mark left arm

H. J. Smith Major for Commanding, 1st Depot Battalion Manitoba Regiment O. C. Depot Btl.

Place Winnipeg Canada Date 4th June 1918

June 4/18

WSB class 6 / 14084

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 3346930 (Rank) Pte

Name (in full) George Anderson enlisted in

the 1st Depot Coy. M.A.

CANADIAN EXPEDITIONARY FORCE at Winnipeg on the fourth

day of June 1918

HE served in M.A. England

and is now discharged from the service by reason of Demobilization. Demobilization K.O. 1920
Medical Unfitness.

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

Age 22

Height 5'7"

Complexion Ruddy

Eyes L. Blue

Hair D. Brown

Marks or Scars

Scars on L. Thumb Accident 1913

G.B. Anderson
Signature of Soldier

S. J. O'Boyle
Issuing Officer

Date of Discharge



Leard
Rank

Date 24.6 1919

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.

CANADIAN EXPEDITIONARY FORCE
DISCHARGE CERTIFICATE

THIS IS TO CERTIFY THAT THE SIGNED AND FULLY ENLISTED IN THE CANADIAN EXPEDITIONARY FORCE ON THE DAY OF HIS SERVICE TO THE CANADIAN EXPEDITIONARY FORCE AND IS NOW DISCHARGED FROM THE SERVICE BY REASON OF THE FOLLOWING REASONS:

THE DESCRIPTION OF THE SOLDIER ON THE DISCHARGE CERTIFICATE IS AS FOLLOWS:

- 1.—That discharge certificate must be carried when wearing uniform.
- 2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing, and
- 3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.

Signature of Soldier _____
Date of Discharge _____
Leaving Officer _____
Rank _____
File _____

NOTE:—As the duplicate of this Certificate will be issued and passed that same is requested to forward to the appropriate authority to the Secretary of the Expeditionary Force, Canada.

A. 752

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

SHB

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 Blennerd. Bevin* 2. Surname *Anderson*
3. Rank *Pte* 4. Original Unit *1st Depot Bn* 5. Reg. No. *3346930*
6. Address, in full, to which future payments of gratuity are to be forwarded
*Union Bank
Winnipeg.*
7. Date of enlistment in the C.E.F. *4-6-18.*
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
9. Relationship of such dependent.....
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?..... *N.A.*
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?.....
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service.....
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. *Total Service 12 months.*
In Canada 2 months.
England 10. (18th Res Battr)
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.

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

20. Have you been issued with a War Service Badge? If so what class?

21. Have you, during the present war, served in the Imperial Forces?

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

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?

(b) If so, was such reversion in consequence of misconduct or inefficiency?

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

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: W.B. Anderson

Place of Residence: 699 Fleet Ave Winnipeg seaford

Declared before me at:

This 29 day of May 1919

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

W. A. Dyer Lieut. Colonel Commanding 18th Canadian Bde Bn

POST DISCHARGE PAY.

| Date paid. | Paid Soldier | Paid Dependent | War Service Gratuity | Net amount due |
|------------|--------------|----------------|----------------------------|---------------------|
| | | | \$280 ⁰⁰ 70. | \$210 ⁰⁰ |

Certified Correct

District Paymaster.

QUESTIONS Nos. 12, 13, 14, 20, 24, 25, 26 and 27 HAVE NOT BEEN ANSWERED.

Handwritten initials 'pm'

FORM OF WILL

George Blennerd Beirnes Anderson.....(Name in full)

Regimental Number **D3346930**.....serving in **1st Depot Battalion, Manitoba Regiment**

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

I devise all my real estate unto

Mrs. Louise Anderson (Mother)
699 Fleet Street Winnipeg
Manitoba Canada

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

absolutely, and my personal estate I bequeath to

Mrs Louise Anderson (Mother)
699 Fleet Street Winnipeg
Manitoba Canada

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

NOTE

This space for the
appointment of
Executor if
• necessary.

IMPORTANT NOTE

this **fifth** day of **June**.....A.D. 191**8**

This must be signed
and Dated by
THE SOLDIER
HIMSELF.

George Blennerd Beirnes Anderson.....Signature of Soldier.

*N.B. Personal estate includes ~~personal effects, bank deposits, insurance policies, etc.~~ everything except real estate.

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

Signature of First Witness.....**M. E. Anderson**

Address of Witness **MINTO ST. BARRACKS WINNIPEG, MANITOBA, CANADA.**

THE TWO
WITNESSES

Occupation of Witness.....**Soldier**

MUST
SIGN HERE

Signature of Second Witness.....**J. P. Owen**

Address of Witness **MINTO ST. BARRACKS WINNIPEG, MANITOBA, CANADA.**

Occupation of Witness.....**Soldier**

FORM OF WILL

George Bernard Palmer Anderson

Residential Number B3348930

I, the undersigned, being of sound mind and memory, do hereby revoke all former Wills by me made and declare this to be my last Will.

I hereby make the following dispositions of my property:

Mrs. Louise Anderson (Mother)

699 First Street Winnipeg

Manitoba Canada

Mrs. Louise Anderson (Mother)

699 First Street Winnipeg

Manitoba Canada

NOTE

This space for the appointment of an executor or trustee.

IMPORTANT NOTE

This must be signed and dated by the testator in the presence of two witnesses.

George Bernard Palmer Anderson

AD. 1918

I, the undersigned, being of sound mind and memory, do hereby revoke all former Wills by me made and declare this to be my last Will.

George Bernard Palmer Anderson

Address of Witnesses: 699 First Street, Winnipeg, Manitoba, Canada

Witness

George Bernard Palmer Anderson

Witness

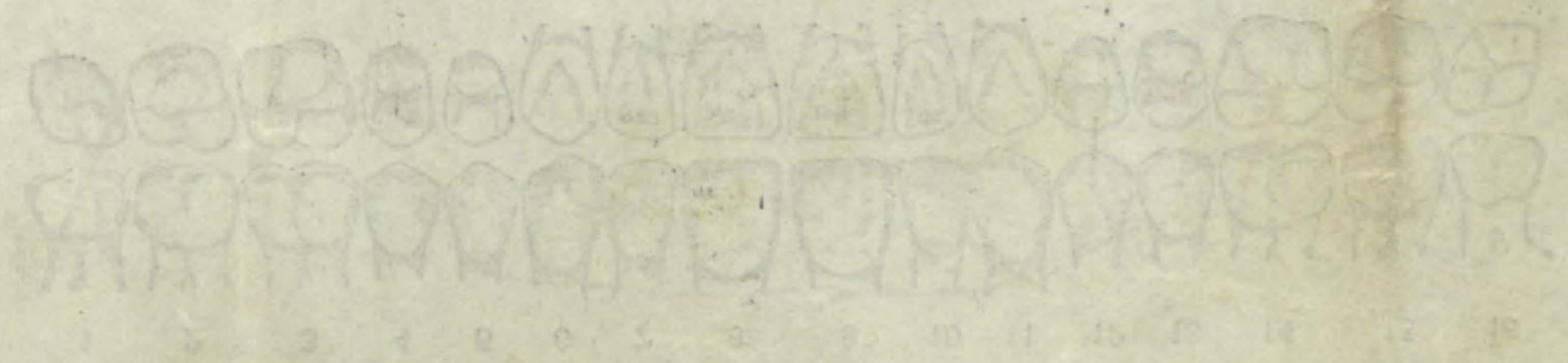
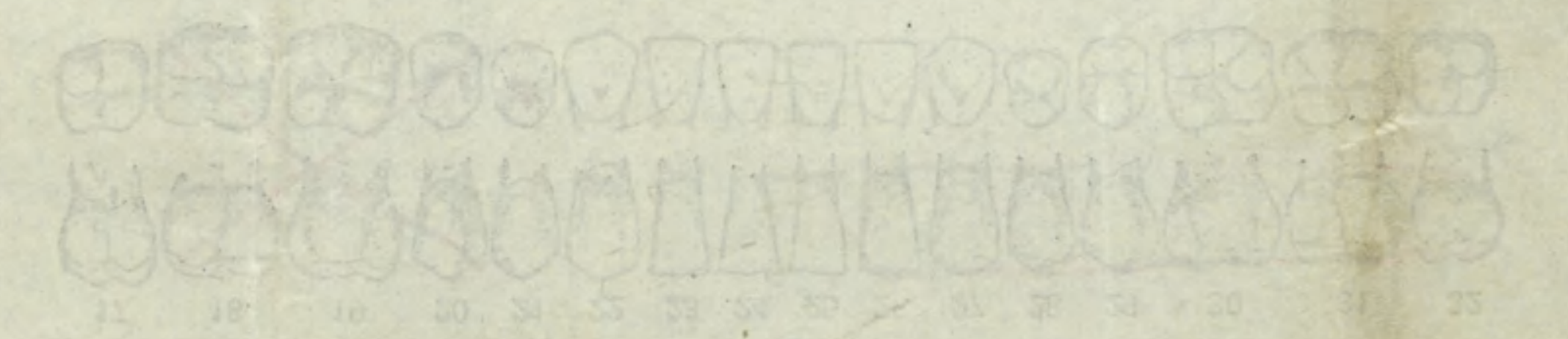
Address of Witnesses: 699 First Street, Winnipeg, Manitoba, Canada

BRITISH
DENTAL HISTORICAL SHEET

George Blomfield, Officer, Engineer
CANADIAN ARMY, DENTAL CORPS

Diagnosis
No. D. 2316830

| |
|-----------------|
| General Notes |
| Chief Complaint |
| History |
| Examination |
| Diagnosis |
| Prognosis |
| Treatment |
| Remarks |
| Signature |
| Date |



EXAMINATION

GENERAL

LOCAL

PROGNOSES

REMARKS

1. On examination the condition of patient's mouth to be treated on
2. On the first of the second of arch to be made in the
3. On the first of the second of arch to be made in the
4. On the first of the second of arch to be made in the
5. On the first of the second of arch to be made in the

INSTRUCTIONS

RP

Rank

Name

ANDERSON GEORGE BLENNER BEIRNES Reg'l No. *3346930*

Unit

81st LHA

Man.

If in perm. Corps, }
What Unit?

Married or Single

Single

Place and Date of Enlistment

Winnipeg June 4/18

Place of Birth

Salsgirth Man.

Name and Address, Next-of-Kin

Mrs. Louise Anderson

699 Fleet Ave Winnipeg Man.

Relationship

Mother

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

W/E. R. B. N. *2456*
File R. L. *ORE*
Category *ORE*

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> | | <i>15 AUG 1918</i> | <i>HMV Helore</i> |
| <i>6-9-18</i> | <i>11 Res</i> | <i>T.O.S FROM Canada</i> | <i>Seaford</i> | <i>15-8-18</i> | <i>Pt, II O 210</i> |
| <i>3-3-16</i> | <i>18th Res</i> | <i>T O S FROM 11 Res</i> | | <i>13-19, D.O, 62</i> | <i>II Res, 52, D/I, 3, 19</i> |
| <i>14-6-19</i> | <i>18 Res</i> | <i>S O S to Canada</i> | <i>Seaford</i> | <i>14-6-19</i> | <i>DC 165</i> |
| <i>13-6-19</i> | <i>---</i> | <i>to be epl with pay</i> | <i>" "</i> | <i>29-3-19</i> | <i>Do 164</i> |
| | | <i>Go Can</i> | | <i>14-6-19</i> | <i>85 M 248</i> |

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

Canadian Printing and Stationery Services, London

DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) ANDERSON G. B.

REGIMENT 18th . RES RANK PTE No. 3346930

Date of Examination in England 28/5/19 Date of Examination in France _____

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 13 15 17

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 YES

(b) In England YES

(c) In France _____

Signature of Dental Officer [Handwritten Signature]

AMERICAN

OFFICE

NO.

1901

1901

AMERICAN

AMERICAN

AMERICAN

AMERICAN

AMERICAN

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AMERICAN

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

5-17 ✓

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

1. Surname Anderson Christian name George Blennerd Beirnes
 2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 534471 J C
 3. Consecutive number on schedule of men reporting for service (if he appears on it) _____
 4. Address (including street and number, if any) Irma P O Alberta Canada 699 Fleet Ave Winnipeg

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 4th day of June 1918, by the undersigned medical board sitting at WINNIPEG, MANITOBA, CANADA.

5. Age as stated 21 Years 5 Months. 6. Apparent age 21 Years 5 Months
 7. Height 5 Feet 7 3/4 Inches. 8. Weight 137 Pounds.
 9. Chest measurement { Minimum 34 1/2 Ins. 10. Complexion Ruddy { Eyes Blue
 { Maximum 37 Ins. { Hair Dark
 11. Physical development Good { Good Fair Poor 12. Smallpox marks _____

13. Number of vaccination marks { Right arm Nil 14. When vaccinated last _____
 { Left arm _____

15. Distinctive marks and marks indicating congenital peculiarities or previous disease Scar R cheek
Scar L arm Scar R arm

16. Slight defects but not sufficient to cause rejection _____
 The man denies having had { Rheumatism Tuberculosis Syphilis We find no evidence of past { Rheumatism Tuberculosis Syphilis
 (Strike out disease admitted or suspected.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A2
W. H. G. [Signature] President.

[Signature] Member. _____ Member.

| Date | Result | VACCINATIONS | Date | Result | ANTI-TYPHOID INOCULATIONS, ETC. |
|---------------|--------|--------------|----------------|--------|---------------------------------|
| <u>9/7/18</u> | | <u>Scott</u> | <u>18/6/18</u> | | |
| | | <u>Carl</u> | <u>2/7/18</u> | | <u>[Signature]</u> |
| | | | <u>1/7/18</u> | | |

Joined 4th day of June 1918 at WINNIPEG, MANITOBA, CANADA.

| CORPS | REG'TL NUMBER | HABITS | DATE |
|---|------------------|--------|---------------|
| <u>1st Depot Battalion, Manitoba Regiment</u> | <u>D 3346930</u> | | <u>4/6/18</u> |
| Joined on enlistment | | | |
| Transferred to..... | | | |

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

| STATION | DATE | DISEASE | RESULT |
|---------|------|---------|--------|
| | | | |

N. B.—This sheet is 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.

Signature of Man [Signature]

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 3346930 Rank Pte Surname ANDERSON
 (Given name in full)

George B B

Unit or Corps 18 Res Birthplace Solsyth Man-

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.)

I. GENERAL DESCRIPTION:

Physique good Weight 160 est lbs. Height 5 ft. 7 in. Colour of Eyes Blue

Nutrition good

Pulse 74 regular

Condition of arteries normal

Vision Rt. 20 Left 20

Hearing (conversational voice) Rt. 2 ft.

Left 2 ft.

Identification marks, scars, or deformities.
 (Give cause and date of origin).
Scar on left thumb
accident - 1913

Opinion as to general health and physical condition Good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No") (Subjective evidence may be sufficient in certain cases.)

Nervous System no Genito Urinary System no Cardio-Vascular System no

Special Senses no Integumentary System no Respiratory System no

Disturbance of Mentality no Muscular System no Digestive System no

Osseous and Joint System no Any other general condition no

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

nil

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Seaford.....(Overseas)
Date 27-5-18..... Signed W.R. Gadsby.....M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature J. B. Anderson.....

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at(Canada)
Date Signed M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature

(If not satisfied, M.F.B. 227 will be completed by a Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

[OVER]

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

M. F. W. 54. (A. F. B. 103.)

500M.—9-16

H. Q. 1772-39-970.

Casualty Form—Active Service.

Unit, Regiment or Corps 1st DEPOT BATTALION, MANITOBA REGIMENT.

Regimental No. D3346930 Rank **PRIVATE** Name Andrew George Blennerd Beirnes
C. E. F.

Enlisted (a) 4.6.18 Terms of Service (a) C.E.F. Service reckons from (a) 4.6.18

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

CIVIL Farmer
MILITARY

Extended. Re-engaged. Qualification (b) **MILITARY**

| 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 4-8-18
DISEMBARKED 15-8-18

6-9-18 O.C. 11th TOS on arrival from Canada Seaford 15-8-18 Pt. 11. Bn. O. 210

3-1-19 O.C. 11th Lt. Col. on posting to Seaford. 3-1-19 Pt. II Bn. O. 62
15th Reserve.

D.W. Knowlton LT. FOR ADJT.
14th RES. BTN. (MAN.)

JUN 14 1919 18 Res

S.O.C. of O.M.F.C. on transfer to C.E.F. in Canada.

SEAFORD, JUN 14 1919 Part 11 D.O. No. 165

W.L. Petri Capt. ADJUTANT,
18th CANADIAN RESERVE BATTALION.

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.

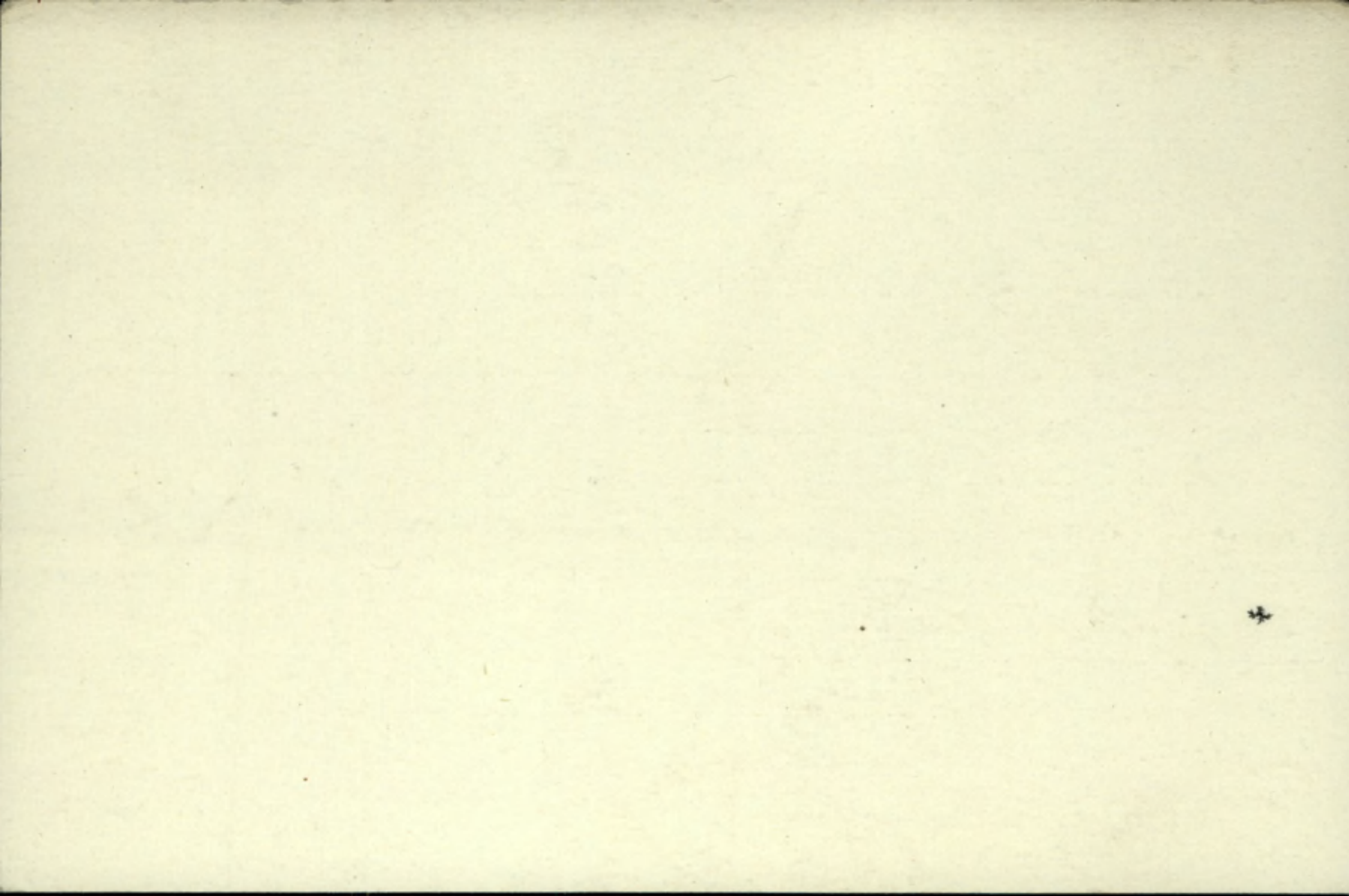
| Report | | Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case | Place | Date | Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents |
|--------|--------------------|---|-------|-----------|--|
| Date | From whom received | | | | |
| | | H. M. ... | | 14. 6. 19 | |
| | | EME ... SOUTH ... | | 20, 6-19 | |
| | | DISEMB ... | | 20 Pa | |
| | | 14. 6. 19 T.O.S. Dispersal Station M | | 179 . 2 | |
| | | and Dispersed 24-6-19 | | do .. 3 | |
| | | B. S. Patton Lieut. for O. C. 10 District Depot. | | | |

Surname Anderson H. Q.
 Christian names George Blennard Beines M. D. No. 10 m
 Regtl. No. 3346 930 Rank Pte T. O. S. June 4th 1918
 Unit Man Regt, 1st Wps Bn D. O. Pt. II 155 of 4-6-18
 S. O. S. Dis 4-6-19
 Reason Dis
 Auth. 179728.6-19
10 m

Next of kin Anderson, Mrs Louise Relationship Mother
 Address 699 Fleet St, Winnipeg,
Man

Also notify:

BORN—Place Canada, Selkirk, Man Date January 13th 1897
 ATTESTED—Place Winnipeg, Man Date June 4th 1918
 O/S 29-7-18 1347 R/C 2046-19351
1 90



Date of Enlistment 4-6-18

MILITIA AND DEFENCE

26437

Date of Assignment

Separation and Assigned Pay Branch

1 Dec 1918

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

RATE OF ASSIGNMENT

| | | | |
|----|--|--|--|
| 15 | | | |
|----|--|--|--|

PARTICULARS OF SEPARATION ALLOWANCE

No. _____
 Rank _____ Promoted _____ Reverted _____ Discharge _____
 Soldier's Name _____
 Battalion 1st Depot Ballin man Reg Prof 81
 Beneficiary _____
 Relationship _____
 Address _____

PARTICULARS OF ASSIGNMENT

Name _____
 Address _____
 Change of Address _____
 1 MRS. LOUISE ANDERSON,
 699 FLEET AVE.,
 2 WINNIPEG, MAN. 15 15.00
 3 % 3346930 PTE GEORGE P. B. ANDERSON
 FIFTEEN DOLLARS
 4

| Date | Cheque No. | Amount S/A | Amount A/P | Total |
|--------|------------|------------|------------|-------|
| Dec 0 | 1998 | | 15 | 15 |
| Jan 16 | 71335 | | 15 | 15 |
| FEB 17 | 78327 | | 15 | 15 |
| MAR 18 | 84016 | | 15 | 15 |
| APR 18 | 1551 | | 15 | 15 |
| MAY 17 | 6504 | | 15 | 15 |
| JUN 17 | 9599 | | 15 | 15 |
| | | | 105 | 105 |

Fyle 0374 983 REMARKS No Roll 10 B2
 HCO 146 83. marked 26:2-18

A/c Closed 30.6.19.
 Ret'd per. *Claytonia*
 Date 20.6/19. M.F.W. 187. M.D. 10.276/19.
Joeliss
 m. R.O. 88444

AUDITED.

AUTHORITY } 2 m 8-10-18
 FOR } m. J. P. ...
 NEW ACCT. } 23-12-18

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

RATE OF ASSIGNMENT

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

Name

Address

Change of Address

1

2

3

4

| Date | Cheque No. | Amount S/A | Amount A/P | Total | REMARKS |
|------|------------|------------|------------|-------|---------|
|------|------------|------------|------------|-------|---------|

M. F. W. 128.
 40M. 6. 7. 1. 72. 84. 1141
 L. L. 22220 - M. & D. 1993.

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), or
 Particulars of Recruit (M.F.W. 133),
 Field Conduct Sheet (M.F.W. 178),
 Casualty Form (M.F.W. 103),
 Last Pay Certificate (M.F.W. 44),
 Certificate that missing documents are unobtainable (M.F.W. 44),
 Medical History Sheet (M.F.B. 313),
 Proceedings of Medical Board (M.F.B. 227),
 Dental History Sheet (M.F.B. 465),
 Medical Report (M.F.W. 129),
 Regimental Conduct Sheet (M.F.B. 263),
 Company Conduct Sheet (M.F.B. 263a),
 War Service Card (Form M.F.W. 2595),
 15. Sundry Documents.

Group A
 Checked by No. 25
 Date 1919

WSB Class C, No 14084
 SHORT FORM.
 PROCEEDINGS ON DISCHARGE.
 (Demobilization.)
 H.M. T. AQUITA
 LIB. DE SOUTHAMPTON, 14. 6. 19
 28-10-39
 LISIMO J. H. L. AX. 20, 6-13

| | | |
|---------------------------------------|---|--------------------|
| 1. No. | 3346930 | |
| 2. Rank. | Pte. | |
| 3. Name. | Anderson. | George B. |
| 4. Unit. | Man. Reg. | 18th Res. T. |
| 5. Date of Discharge | 24. 6. 19 | Place Winnipeg Jan |
| 6. Reason for Discharge | Demob. | |
| DISPERSAL AREA. | M. 10 | |
| OCCUPATIONAL GROUP. | 1 | |
| 7. Authority. | 20 149 | |
| 8. Proposed Residence after Discharge | 699 Fleet Ave. Winnipeg Manitoba. | |
| 9. | <p>CERTIFICATE TO BE SIGNED BY SOLDIER.</p> <p>I hereby acknowledge that at the undernoted place and date I received my discharge Certificate</p> <p>M. F. W. ?</p> <p><i>George B. Anderson</i></p> <p>Signature of Soldier.</p> | |
| 10. | <p>CONFIRMATION.</p> <p>The discharge of the above named man is hereby confirmed.</p> <p>Place <i>Dispersal Station</i></p> <p>Date <i>JUN 24 1919</i></p> <p><i>S. H. Tobday</i></p> <p>Signature (O. C. Discharging Unit.)</p> | |

3 BEIRNES.

| | |
|----------------------------------|--|
| ASSIGNED PAY: ENGLAND OR CANADA. | SEPARATION ALLOWANCE: ENGLAND OR CANADA. |
| EFFECTIVE DATE: 1/12/18 | EFFECTIVE DATE: - |
| AMOUNT: 15 ⁰⁰ ms | AMOUNT: - |

NAME: ANDERSON, 'GEORGE' BLENNERD
 NUMBER: 3346930.

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.

Mrs Louise Anderson
 699 Fleet Ave
 Winnipeg
 Redges 81 Bal

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 |
|-----------------|----------------|--------------|--------|-----------------|----------------|--------------|--------|
| 29.5.19 | 1337 | | 24 33 | | | | |
| | | | ESP | | | | |

PARTICULARS OF RENDERING NON-EFFECTIVE

| MONTH | PARTICULARS | CR. 1 | CR. 2 | PARTICULARS | DR. 1 | DR. 2 | DR. 3 | DR. 4 | BALANCE | DEFERRED | SEPARATION |
|-------------|--|-------------|---------|------------------|-------|-------|-------|-------|---------|----------|--------------------|
| 21/11/18 | Bal from ban. | | | | | | | | 29 10 | | |
| Aug | Pte Pay | 34 10 | AR 7 | 20/8/18 Bourley | 4 87 | | | | 58 33 | 15 | |
| SEP | " | 33 - | " 792 | 2/9/18 | 4 87 | | | | | | |
| | | | " 2079 | 29/9/18 11 Res | 9 73 | | | | 76 73 | 30 | at agreed 30/9/18. |
| Oct | | 33 24 10 | | | 14 60 | | | | | | |
| | | | AR 2297 | 14/10 | 9 73 | | | | | | |
| | | | " 2373 | 29/10 | 9 73 | | | | 91 37 | 45 | |
| Nov | | 33 | AR 2192 | 9/11 | 9 73 | | | | | | |
| | Dec. 1918 | 68 30 | " 2728 | 27/11 | 4 87 | | | | | | |
| | | | " 3051 | 18/12 | 24 33 | | | | | | |
| | | | C.A.P. | | | | | | 36 | 79 84 | 60 |
| | | 101 20 | | | 82 73 | | | | 30 | | |
| Feb & March | | 64 90 | | C.A.P. | | | | 15 | | | |
| | Under credited Holiday @ 60¢ 14.2.19. to 31.3.19 | | AR 3238 | 11 RES 11. 1. 19 | 9 73 | | | | | | |
| | diff between Pte & Bank pay 16.7.19-6.19 18 RES | 27 60 | " 3538 | 24. 1. 19 | 9 73 | | | | | | |
| | | | " 3844 | 12. 2. 19 | 9 73 | | | | | | |
| | | | ✓ 4122 | 27. 2. 19 | 4 87 | | | | | | |
| | | | | | 34 06 | | | | | | |
| | | | | C.A.P. | | | | 15 | | | |
| | | | ✓ 4174 | 12. 3. 19 | 9 73 | | | | | | |
| | | | 4456 | 21. 3. 19 | 9 73 | | | | | 88 82 | |
| | | 92 50 | | | | | | | | | |

PARTICULARS OF RANK OR APPOINTMENT

| AUTHORITY | DATE EFFECTIVE | RANK OR APPOINTMENT |
|------------------------|----------------|---------------------|
| L. P. C. | | Pte |
| 2078. 19. 3. 19 18 RES | 14. 2. 19 | Bank special emp |
| 26. 18 RES 31. 3. 19 | 1. 4. 19 | Pte |
| 98. 8. 4. 19 | 17. 3. 19 | Bank |

UNIT AND TRANSFERS
 ORIGINAL UNIT: - 1st. DEP. BN. M.R.
 DATE ACCOUNT FIRST OPENED: - 1-8-19.

| AUTHORITY | DATE EFFECTIVE | DATE LEDGER SHEET T'S F'D | UNIT TRANSFERRED TO |
|-----------|----------------|---------------------------|---------------------|
| | | | 11th Res |

DAILY RATES OF PAY AND ALLOWANCES

| AUTHORITY | PAY | F.A. | P.F.A. | SUBS'CE ALL'CE |
|---------------------|------|------|--------|----------------|
| | 1 50 | 20 | | |
| 26 18 RES 31. 3. 19 | 1 00 | 10 | | |
| 29. 8. 4. 19 | 1 50 | 20 | | |

Redges 81 Bal 103 47
 Pte 79 14

Quintan 30/6/19 £. 10/25 Seafood 4/6/19 Seafood (MD 10)

See pay sheet
 11th Res

NUMBER 3346930 RANK

NAME ANDERSON G.B.B.

| MONTH | PARTICULARS | CR. 1. | CR. 2. | PARTICULARS | DR. 1 | DR. 2 | DR. 3. | DR. 4. | BALANCE | DEFERRED | SEPARATION |
|-------|--|--------|--------|------------------------|---------|-------|--------|--------|---------|----------|------------|
| | | | | Bnt Prd | | | | | 88 82 | | |
| April | to May Pte Pte Clerk | 67 10 | 110 | 18 Res | 7.4.19 | 19 47 | | | | | |
| | diff between Clerk & Pte | | | | | | | | | | |
| | Under credited 30 days @ 60 cent per day April | 18 00 | 540 | ✓ | 28 ✓ | 29 70 | | | | | |
| | Under credited with 31 ✓ ✓ ✓ May | 18 60 | 800 | ✓ | 12.5.19 | 48 67 | | | | | |
| | | | | CAP | | 97 34 | | | | | |
| | | 103 70 | | | | 97 34 | | 30 | 65 18 | | |
| | | | | | | | | 30 | | | |
| June | Clerks | 51 | | CAP | | | | 15 | 10 18 | | |
| | Int On Def Pay | 2 29 | | AR 1337 20/5/19 18 Res | | 24 33 | | | 103 47 | | |
| | Clerk | 53 29 | | | | 24 33 | | 15 | 115 14 | | |
| | | | | | | | | | 79 14 | | |

NO Advance 14/6/19 short 85. 18 Res

A. 752

AQUITANIA

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING
DAILY RATE OF PAY AND ALLOWANCES

REGT. NO. 3346930 RANK Pte

NAME (IN FULL) ANDERSON, G. B. B.

AUDITOR PAYMASTER J-3

M. OR S.

NEXT OF KIN RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? DATE EFFECTIVE

TO WHOM PAID RELATIONSHIP

ADDRESS

PARTICULARS

EFFECTIVE DATE

AUTHORITY

ORIGINAL UNIT C.E.F. 1st DBMR

IF IN P.F. WHAT UNIT? (BLOCK LETTERS SURNAME FIRST)

ATTESTATION

DATE OF ATTESTATION

ASSIGNED PAY \$ 15.03

PAYABLE TO

ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE

DISCHARGED

TRANSFERRED TO Dls Str M

DATE JUN 14 1919

DATE EFFECTIVE

RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS

PLACEMENT M. D. 10

DATE JUN 24 1919

REASON D

AUTHORITY D, O, 179

IF ENTITLED TO POST DISCHARGE PAY

24

1719 G. Anderson
1699 Fleet Ave

Union Bank
17-19

| MONTH | PAY AND F.A. | | OTHER CREDITS | | TOTAL CREDITS | | ACQUITTANCE ROLLS | | | CASH PAYMENTS | | | ASSIGNED PAY | REGI-MENTAL CHARGES | OTHER CHARGES | TOTAL DEBITS | BALANCE | | PARTICULARS OR REMARKS | |
|------------------------|--------------|------|---------------|----|---------------|--------|-------------------|----|------------|---------------|------------|------|--------------|---------------------|---------------|--------------|---------|---|-------------------------------------|----|
| | NO. OF DAYS | RATE | AMOUNT | | S | C. | S | C. | COL. NO. 1 | COL. NO. 2 | COL. NO. 3 | S | | | | | C. | S | | C. |
| | | | \$ | C. | | | | | | | | | \$ | C. | \$ | C. | | | | |
| 1-4-7-19 | 4 | 170 | 6.80 | 70 | 79.14 | 79.14 | 111.80 | | | 107811 | 4.87 | 5.00 | 181.07 | | | 19094 | 79.14 | | BAL. ENG. L. P. C. | |
| | | | | 70 | | | | | | | | | | | | | | | Clothing Alloe. 1st payment W.S.G. | |
| | | | | | | | | | | | | | | | | | | | Advances - Boat - Trip | |
| | | | | | | | | | | | | | | | | | | | A. P. chd. on Eng. L. P. C. to June | |
| 122 days @ Min July 20 | | | | | 280 | 280 | | | | | | | | | | | | | 1st Payment W.S.G. as above | |
| | | | | | | | | | | | | | | | | | | | 70 2nd pay w/sy | |
| | | | | | | | | | | | | | | | | | | | 70 3rd | |
| | | | | | | | | | | | | | | | | | | | 53rd final | |
| | | | | | | 280.00 | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | |

AUDITED
18 1919