3884

3884

R. O. No.

H. Q. No.

3884

DISCHARGE DOCUMENTS

Name Ball George Stanley

Regt. No. 273434 Rank Pte.

Corps 216th Bn. C.E.F.

Permanently Unfit.

Proceedings of Court of Inquiry or C
Reported Missing on Active Servi
Attestation Papers..... 1 3
Declaration of change of name.....
Authority for special enlistments.....
Documents of re-enlisted men.....
Regimental Conduct Sheet..... 1
Compulsory Stoppages.....
Casualty Forms..... 1
Proceedings on discharge..... 1
Corps History Sheet.....
Date and No. of Deposit Receipt for Purchase Money and Amount.....
Parchment Certificate.....
Medical Report for Invalids.....
Medical History Sheet..... 2
Proceedings of Regt. Court Martial.....
Copies of Convictions by Civil Power.....
Company Conduct Sheet..... 1
Clothing Transfer Certificate..... 1
Inventory of Kit.....
Last Pay Certificate.....

M.F.W. 14. — — 1
R. 114 — — 1 2 forms of Duke
Casualty — 2

2-25
18-26
17/28

M. F. W. 62.
100m.—6-17.
H. Q. 1772—39—935.

1

ORIGINAL

ATTESTATION PAPER.

No. 213434.

216th Battn.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	BALL
1a. What are your Christian names?	George Stanley
1b. What is your present address?	63 Ann St. Toronto, Ont.
2. In what Town, Township or Parish, and in what Country were you born?	Manchester, Eng.
3. What is the name of your next-of kin?	Martha Ball
4. What is the address of your next-of-kin?	63 Ann St. Toronto Ont. Can.
4a. What is the relationship of your next-of-kin?	~~Mother~~ Wife
5. What is the date of your birth?	Nov. 29, 1874
6. What is your Trade or Calling?	Waiter
7. Are you married?	Yes
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9. Do you now belong to the Active Militia?	No
10. Have you ever served in any Military Force? 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 Canadian Over-Seas Expeditionary Force?	Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, George Stanley Ball, 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 Stanley Ball (Signature of Recruit)

Date 13th April 1916 191 . H. Littlehales (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, George Stanley Ball, 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 Stanley Ball (Signature of Recruit)

Date 13th April 1916 191 . H. Littlehales (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Toronto this 13th day of April 1916 .

(Signature of Justice)

M. F. W. 22.
600M.—2-16.
H. Q. 1772-89 M.L.

Description of George Stanley Ball on Enlistment.

Apparent Age 41 X years 5 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 11½ ins.

Chest measurement.
- Girth when fully expanded ..... 33½ ins.
- Range of expansion ..... 2 ins.

Complexion ..... Dark

Eyes ..... Brown

Hair ..... Black

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

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).

Scar on left calf.

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 13th April 1916 191 . F. H. Lumley Capt.

Place Toronto ..... Medical Officer.

*Insert here "fit" or "unfit."

Toronto Recruiting Depot

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 Stanley Ball 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.

J. A. Runkin Lt. (Signature of Officer)
216th O.S. Battalion, C.E.F.
"BANTAMS"

Date APR 14 1916 191 .

CANADIAN OVERSEAS EXPEDITIONARY FORCES

Discharge Certificate

This is to Certify that No. 2734314 (Rank) Private

(Name in Full) Ball. George Stanley enlisted in

216th Overseas Battalion

Canadian Overseas Expeditionary Force, on the Thirteenth of April

1916, and accompanied said unit to England

was returned to Canada, and discharged from the service at Quebec, P.Q.

on the Twenty-seventh of August 1917, in consequence of being

no longer physically fit for war service.

DESCRIPTION ON DISCHARGE

Age 43 years.

Height 5 feet 1½ inches.

Complexion Dark.

Eyes Brown.

Hair Dark Brown

Trade Waiter

Marks or Scars

Ptosis left eye lid

Scar on left calf.

Signature of Man

Officer in charge Discharge Depot.

Place and Date Ottawa, August 28th 1917.

SHOULD THIS DISCHARGE CERTIFICATE BE LOST, NO DUPLICATE OF IT CAN BE OBTAINED. H.D.

N. B.—Any person finding this Certificate is requested to forward it in an unstamped envelope to The Secretary, Militia Council, Ottawa, Canada.

M. F. W. 39
200m.-5-15.
H.Q. 1772-39-882.

H.Q. 649-B-18160.

B

CANADIAN OVERSEAS EXPEDITIONARY FORCES

Discharge Certificate

No. 273434.

Rank Private.

Name Ball. George Stanley.

Unit 216th Overseas Bn.

Address on Discharge

52 Foxley Street,

Toronto, Ontario,

Canada.

His conduct and character while in the Service have been : Good.

Place Ottawa, Canada.

Date August 28th 1917. Commanding

Campaigns

Medals and Decorations

(22189) W9988—M1025. 150,000. 11/16. L. & M. Ltd. Forms /W3068/2.

Army Form W. 3068.

TRANSFER STATEMENT OF CLOTHING & NECESSARIES.

INSTRUCTIONS.—This Statement will be made out by the Depot, and will be sent to the Commanding Officer of the unit receiving the transfer, who will retain it as a voucher to the unit's clothing account. The Statement will also be forwarded in the case of men in the United Kingdom passing from Hospitals to Depots or units.

STATEMENT showing the Articles in possession of (*Regimental No.*, *Rank and Name*) 243434 Pte Ball G.S.

proceeding from the Canadian Discharge Depôt, Buxton.

to the Discharge Depôt, Quebec.

Date of enlistment _____ Date of transfer _____ 191 .

FOR DETAIL OF ARTICLES, see overleaf.

Certified that this Statement, as detailed overleaf, is correct in every particular.

(1) Station Buxton. George J. Skelton Lieut. & Q.M.
Commanding Squadron, Battery, &c.

Date 9. JUL. 1917 Canadian Discharge Depôt, Buxton.
Name of Unit man is leaving.

(2) Station _____
Commanding Squadron, Battery, or Company.

Date _____
Name of Unit man is joining.

ARTICLES OF CLOTHING & NECESSARIES IN POSSESSION.

Articles not in possession should be struck out of the list. Any articles not included should be inserted.

Clothing	No.	Necessaries	No.
Aprons, Kilt		Badge, Cap	
Boots, Ankle, pairs	✓	Bag Kit	✓
Caps, Service Dress	✓	Braces, pairs	✓
Caps, Glengarry		Brass, Button	
Drawers, pairs	2	Brush, Brass	
Frocks, Canvas		,, Blacking	
Greatcoat, D.M.	✓	,, Clothes	✓
Jackets, Service Dress ..	✓	,, Hair	✓
Kilts		,, Polishing	
Pantaloons, Cord, pairs ..		,, Shaving	✓
Putties, pairs	✓	,, Tooth	✓
Spurs, Jack, pairs		Cap, Comforter	
Trousers, Service Dress, pairs	✓	Comb, Hair	✓
Trousers, Canvas or Khaki Drill Overalls, pairs		Disc, Identity, with Cord ..	
Waistcoat, Cardigan ..	✓	Fork	
Coat, Waterproof		Garters, Highland, pairs ..	
Gloves, Leather, pairs ..		Holdall	✓
Gloves, Motor Cyclist, pairs		Hose Tops, pairs	
Goggles, pairs		Housewife	✓
Vests Woollen	2	Knife, Clasp	
Razor & Case	1	Knife, Table	
		Laces, Leather, Spare, pairs	
		Shirts, Flannel	2
		Socks, Worsted, pairs ..	3
		Spoon	
		Titles, Metal, pairs ..	
		Towels, Hand	2
		Wax Polish Tin	

I certify that this statement is correct.

Date - 9. JUL. 1917

Signature of the Soldier T. S. Ball

No 273.434

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

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

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

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

.....

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

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

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

.....

.....

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

.....

.....

.....

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

..... Yes .....

(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.

1

.....
for *Officer Commanding*

Date..... Sept/28/1916

216th O.S. Battalion, C.E.F.
"BANTAMS"

To be made out in duplicate. H.Q. 54-21-23-53

A Only One Copy

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 216th Op. Batt. C.E.F.

(2) Regimental Number 213434

(3) Full Name of Soldier George Stanley Ball.

(4) Place of Birth Manchester England.

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

(6) If married, state,
(a) Full name of your wife Martha Ball.
63 Ann Street Toronto.
(b) Present Postal Address

(7) Are you a widower? No

(8) Have you any children? Yes.
If so, give number of boys and girls 5 Boys. 1 girl.
Also their names and ages Stanley Ball 22 years Victor Ball 17 yrs.
Cyrel Ball 15 yrs Earnest Ball 9 yrs George Ball 7 yrs
Bertha Ball 11 yrs

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

DUPLICATE

Add. same

M D 2

M

FORM OF WILL.

I, George Stanley Ball (Name in full)

Regimental Number 273434 serving in 76th Bn.

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

I bequeath all my real estate unto

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

absolutely, and my personal estate I bequeath to

Bertha Ball. 63 Ann St. Toronto.	Name and Address of person or persons to receive personal estate* *(See note).*

IMPORTANT NOTE
This must be Signed and Dated by THE SOLDIER HIMSELF.

this 28th day of Dec A. D. 191

George Stanley Ball Signature of Soldier.

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

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

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness J Newman

Address of Witness 13 7. ave St Pierre

Occupation of Witness Miners

Signature of Second Witness Arthur Lee

Address of Witness Scotia Junction

Occupation of Witness Switch Board - Operator

M. F. W. 82
300M-5,16.
1772-39-983.

FORM OF WILL.

I, ...

of the County of ..... State of .....

make and declare this to be my last Will.

I direct all my real estate to

.....

.....

.....

MDR

FORM OF WILL.

I, George Stanley Ball (Name in full)

Regimental Number 273434 serving in 216th Battalion

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

I bequeath all my real estate unto

Bertha Ball
63 Ann St.
Toronto

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

(Spouse preferred)

absolutely, and my personal estate I bequeath to

above

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

IMPORTANT NOTE
This must be Signed and Dated by THE SOLDIER HIMSELF.

this 10th day of April A. D. 1917

George Stanley Ball Signature of Soldier.

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

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

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness J. W. Armbrey

Address of Witness 61 Farnham Ave Toronto

Occupation of Witness Student.

Signature of Second Witness James H. Pedley

Address of Witness 43 Harbord St., Toronto

Occupation of Witness Student-at-Law

M. F. W. 82
300M-5-16.
1772-39-983.

Proceedings of

Medical Boards.

held at Sharncliffe. - 21-6-17.

also at. Quebec. - 7-8-17. and

date Particulars of soldier 7-8-17.

Sent to C. A.

date. 14-8-17.

Dis. Section

JB.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps 3rd Res. Military Hospital

No. 273434 Rank and Name Pte. G.S. Bale Age 43 Service 1 4/12

Disease Indigestion Date of admission 22-5-17 Date of discharge 27.6.1917 Result Discharged to Canada

Dates of Observation	May 22	23	24
Days of Disease			

Temperature Fahrenheit — Time A.M.P.M. (8 6 4 2)

107° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°

Pulse per minute

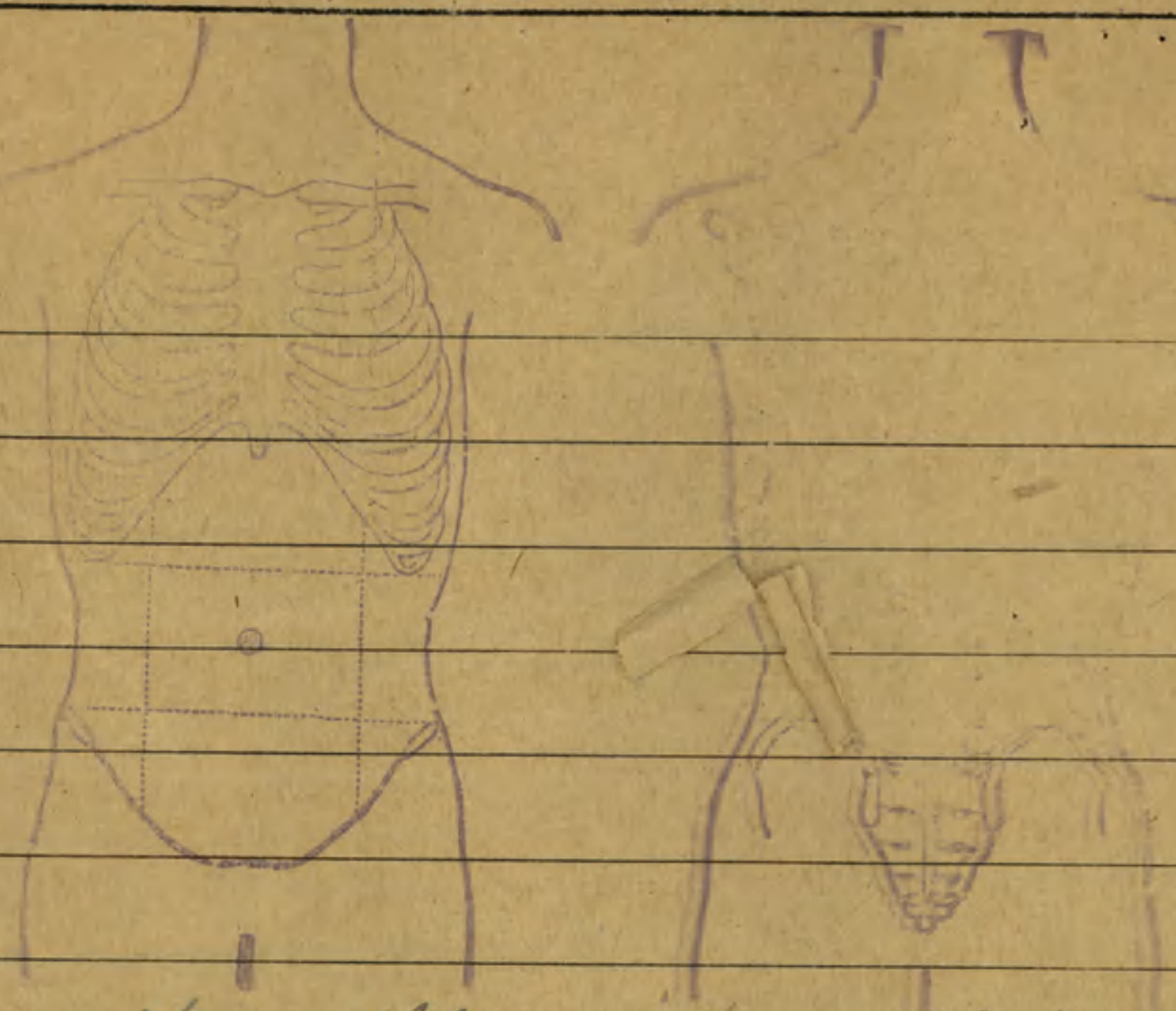
Respirations per Minute

Motions per 24 Hours

2773

(29342) W6465—M789. 1,000,000. 9-16. D.P.W. A.F.B. 181. (373)

Signature E.E. Bleasdale Capt In charge of case.

Station and Date.	
	
Stomach Contents	Mucus +, Free Hcl 40 ~~Total~~ Acidity 56. Blood neg.
Radiographic Exam.	Stomach outline greater curvature irregular area. Empties in 5 hours. Position good. Intestinal ~~tract~~ tract fills and empties normally.
Urine Analysis.	Neg.
June 6th	Harmless Chest. Belching J Jaw Palpitation,
June 20th	+ Recommended for discharge as unfit.
June	Discharged — Left Hospital for Boston a 27th June. Awaiting sailing E Ebleaver Adj

Forms
I. 1237
11

MOORE BARRACKS.
CANADIAN HOSPITAL
SHORNCLIFFE.

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
27731	273434	Pte	Ball	George

Year 1917

Unit. 3rd Res.

Age. 43

Service. 4/12

Station and Date. 22/5/17 Salisbury

Disease Indigestion 15th April 1916 Not Known

Toronto Occ - Waiter

Complaint: Indigestion. eyes dim Pulse 7 Lent. Pains in arms & wrist. Heaviness in abd. Belching 7 gas & throat sore

Duration: 5 years

P.H.: Measles, pneumonia. 2 years ago. Now has very strong a Semis K.S. Heavy drinker for 20 yrs.

F.H.: negative.

H.P.I.: No pain in stomach. Just a sense of heaviness, in stomach. Lent sore. & belching 7 wind. No vomiting always has wind in stomach and when wind is worst he gets palpitation 7 Lent. & pain in sore. Bowels irregular when not doing drinks. No Constipation or blood in stools.

Physical Examination:- Fairly well nourished

Heart & Lungs negative. Pupils & reflexes

Can walk without support by myself.

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

298-18-8-17

DEPT
MILITIA & DEFENCE
AUG 18 1917
H.Q.
CANADA

Medical Examination Upon Leaving Service

An Officer Fit For General Service Or a Soldier Fit For Duty.

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaivng the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank ...ple.... Name .George Stanley Surname Ball.....
Unit or Corps .....2.1.6...R Battn. (if a soldier) Regt. No.2.3.4.3.4
Born at ..Manchester England...on, date Nov 26th 1874.
Signature (for identification) ....George Stanley Ball.....
.....

The examination is to be made jointly by two Medical Officers.

1. PHYSIQUE—Any deformity, maiming, or lameness? If so, describe.
.....no.....
Weight ....109..... lbs.
Height .....5 ft. 1.... in.
.....

2. NUTRITION and DIATHESIS.
.....poor.....

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. NERVOUS SYSTEM?
.....no.....

4. RESPIRATORY SYSTEM?
.....no.....

5. HEART?
Abnormal sounds? no
Abnormal size? no
Pulse rate? 72 Intermittence or irregularity? no
.....

6. ARTERIES. Any hardening?
.....no.....

6. DIGESTIVE SYSTEM?
.....chronic gastritis.....

8. GENITO-URINARY SYSTEM? no
Urinalysis—SG. ..... Reaction ..... Albumin ..... Sugar .....
.....

9. SKIN, MIDDLE EAR, EYE or any other part? no

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. no
.....

11. Opinion as to the health and physical condition of the one examined?
.....fair.....

Examined at ...Quebec.....Sgd. ...T. C. Cairns Capt M. O.
Date .....6th aug/17.....Sgd. .....A Surg Capt..... M. O.

If any disease or impairment of health or physical condition is discovered this report should be sent at once to the O. C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.

4 E

Form to be Used Instead of Blank Space on Army Form 179.

Proceedings of Medical Board at Discharge Depot.

No. 273434 Rank pte Name and Corps of disabled Soldier:— Ball George Stanley 216 4th Battn

Previous civilian occupation:— waiter

Cause of Disability:— Chronic Gastritis not due to service

Condition, in detail, which prevents the soldier earning a full livelihood:—

about 5 years ago (prior to enlistment) soldier began to have pains in the stomach. Now he belching of gas regurgitation of mouthfuls of sour ~~to~~ fluid. Gastric analysis. mucus + Free HCl. 40. total acidity 5-6. Radiographic report. irregular area on greater curvature position good. He is under size and underweight. He has never done full duty in the army and is as well as on enlistment and not liable to be of any service in the army. heart and lungs normal

OPINION OF THE BOARD. ~~Not due to service~~

Degree of incapacity. (Please state in fractions) 1/3 not due to service

Probable duration of incapacity:— permanent.

Does it render him permanently unfit for Military Service? yes

Would operation, Special treatment, or use of appliances, etc., lessen incapacity ? no

Signature:—

..... A. E. Cairns Capt.
President.

Station:— Quebec.

.....
.....
Members.

APPROVED.

Date..... Aug 7/17.

..... W. McCammon Major
Asst. Director Medical Services.

Date.....

.....
Director General Medical Service.

8

Discharged 17-8-17. CMB.

Surname Ball Christian Name George Stanley

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital: Day	Month	Year	Dates of Discharge from Hospital: Day	Month	Year	DISEASE.	Number of days in Hospital	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
Moore Barracks Hpl, Shornclife.	27735	MAY 22	1917				Chronic Indigestion		History of dull pain in epigastrium for five years. Duckets more marked at night. Belching of gas. Regurgitation of sour mouthfuls. Must able to eat fancy diet. Gastric analysis mucus + Free HCl 40 Total acidity 56. Blood neg. Radiographic report. Stomach outline Greater curvature irregular area Empties in 5 hours. Position good Duodenal duct fills and empties normally. Recommended for discharge as permanently unfit		E Eblana Capt RAMC

1.

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Ball *Christian Name* George Stanley

Examined { on 13th day of April 1916 191
at Toronto

Approved by G. H. Hughes Capt

Birthplace { City or Town Manchester, Eng.
County

Rank Toronto Recruiting Depot M.O.

Apparent age 41 yrs.

Trade or occupation Waiter

Height 5 Feet 1¼ Inches.

Weight 108 Lbs.

Chest measurement { Minimum 30½ inches.
Maximum expansion 32½ inches.

Physical development Good

Small-Pox Marks nil

Vaccination Marks { Arm Right. Left. 4
Number 4

When Vaccinated last Infant

(*a*) Marks indicating congenital peculiarities or previous disease nil

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

Date.	Fit or Unfit.	Examined for Re-engagement.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
7/9/16		M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
16/8/16		M.O.
23/8/16		M.O.
7/9/16		M.O.

Enlisted on 13th *day of* April 1916 *191* *at* Toronto

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	216th Battn.	273434		April 13th 1916
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
MD C.H.	21-6-17	Indigestion. Ch	Discharged
	22 JUN 1917	Approved	H. B. Thomson. Capt Can Inf
		A. Labacken CAPT. FOR A.D.M.S. CANADIANS, SHORNCLIFFE	

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. 1772-39-439.

4

LABORATORY REPORT

Army Form W. 3212. (In books of 100.)

Regtl. No., Rank and Name Pte Ball 273434. Corps ~~7~~ 3rd Res

Disease Indigestion Hospital Moore Barracks

To Officer i/c Laboratory. Ward 12.

Please carry out an examination of the accompanying specimen of Stomach Contents

with special regard to

Date June 6 14 17.

E Bleasdale

O. i/c Ward.

LABORATORY REPORT.

Mucus +
Free HCl 40
Total acidity 56.
Blood. neg.

Date of Examination

B L Cornell Lt

O. i/c Laboratory.

W 12965—6740 200,000 11/15 H W V (M 875) Forms/W. 3212/1
1439—480 200,000 5/16

X.Ray Department,
Moore Barracks, Canadian
Hospital.

5192

13.6.17.,

M.O.,
Ward 12.,
M.B.C.H.,

273434 Pte. BALL,J., 3rd Res. A.D.No.27731

Stomach outline greater curvature irregular area. Empties in 5 hours. Position good. Intestinal tract fills and empties normally.

R.D. Johnstone
Capt. C.A.M.C.,

X.Ray Department,
Moore Barracks, Canadian
Hospital.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at ..... 19[illegible]

No. ..... Rank ..... Name .....

Unit, Division or Establishment ..... Age .....

Examination held at .....

DISABILITY.

Obtained on service—Local
(State nature).

PRESENT CONDITION.

BOARD'S RECOMMENDATIONS :—

1. Fit for Duty .....
2. Fit for duty after ..... weeks' physical training.
3. Fit for Temporary Base Duty ..... weeks.
4. Fit for Permanent Base Duty .....
5. Discharge .....

Signatures :—

.....President.

.....

.....Members.

.....

APPROVED

Dated ..... 19[illegible].

For A.D.M.S.

Form D.M.S. 1394.
7004.—100M.—5/2/17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at 21 — 5 — 1917.

No 2734434 Rank Pte Name Ball Geo. S.

Local Unit 3rd Res Bty Overseas Unit — Age 43

Examination held at W Sandling

DISABILITY.
Overseas—Local
(scratch one out).

PRESENT CONDITION.

States he has chronic indigestion - palpitation & pain when running - pains in wrists & ankles -
Ptosis L left eyelid and claims he cannot see with it. Is undersized and looks older than he states - poorly nourished and is unable to carry on.

Moore Bks Hosp
for observation.

BOARD RECOMMENDS:—

1. Fit for Duty.....

2. Fit for duty after.....weeks' physical training.

3. Fit for Temporary Base Duty .....weeks.

4. Fit for Permanent Base Duty.....

5. Discharge .....

Signatures:—

Members .....President.

.....

.....

APPROVED

Dated.....1917. .....

For A.D.M.S.

M. F. W 41
1 0M—7-16
1772-39 889.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					

M. F. W. 41
1 0M—7-16
1772-39 889

2278

Pte Name Ball G. S.

MILITIA & DEFENCE OTTAWA
CASUALTIES, C.E.F.
SEP 14 1917
Pay & Accounts Branch, Militia Dept.

Regimental No. 273434

Unit 216 Bn

Date of enlistment 13. 4. 16

Place of " Toronto

Married (yes or no) Yes ap. april 1917 chgd on Bn Pay List

Amount of pay assigned monthly $ 15- 1/17-31/7-60

To whom payable Mrs Martha Ball
52 Foxley St
Toronto

Justicia 1/8/17

Home Address ~~of next-of-kin~~ 52 Foxley St
Toronto ont

Med Bd 7/8/17

S/A. 20. 13/6- 31/8/17 $332.00

Date and place discharged

Reason for discharge

Character on discharge

Class I H.Q. 649-B-18160

Form 5351—M. & D. 1880.

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
	28/6/17							36								E. L.L.C.
29/6/17	27/7/17	60	1	60 = .60			10 60							9 73		A R 4531
								9 00	75 36					4 87		boat A.R. 1
														60 76		D. D. Que. Subsistance
									15 00				+15 00		90 36	× July
									90 36						90 36	
~~Suspended 24/10/17~~							~~15 00~~	~~15 00~~					(~~17 36~~)	15 00	15 00	Dr Bal Forward
Transfd. to H.2. Susp. 30/7/8							15 00	15 00						15 00	15 00	Discharge 27/8/17
																D.D. Quebec class I

Classified 19-11-20
Military Sus.

X?

File 782-65-15.

L.R.

FOP 2/11/20 Wood

Civilian clothing issued Emg A.P. chgd to 30/6/17

13-4-16

L- L. Job 310—M. & D. 6574.

MILITIA AND DEFENCE

M. F. W. 11.
50m.—4-16.
H. Q. 1772-39-818.

98

SEPARATION ALLOWANCE

Name Martha Ball

Address 63 Ann Street. Toronto.

Relation to Soldier wife, child or mother } Wife.

Name of Soldier Ball George. S.

Regtl. No.

Rank Pte.

Corps 216th Btn

To what Corps belonging when called out }

PAYMENTS

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

CONSOLIDATED 5 ACCOUNT

COPIED FOR CASUALTIES.

ACCOUNT CLOSED
DATE ..... PER ..... W

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

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.				

13-4-16

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
50m.—4-16.
1772—39—818.

Sheet No. 2. Martha Ball Wife

Name of Soldier Ball George. S. Pte.

L. L. Job 310.—Req. 6574.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May		42788	32	32
June		D 2400	20	20
July		R10209	20	20
Aug.		G.11065	20	20
Sept.		L15194	20	20
Oct.		L 18571	20	20
Nov.		M 18579	20	20
Dec.		R 20964	20	20
Jan.	1917	K27212	20	20
Feb.		K30452	20	20
March		K33680	20	20
April		L. 100	40	20
May		L 3172	20	20
June		M 6815	20	20
July		L 10019	20	20
Aug.		N 13176	20	20
Sept.			20	13
Oct.				A/c Closed
Nov.			332 00	Ret'd per Justicia
Dec.				Date 18/5/17. F. X. 30/8/17.
Jan.	1918			Clerk J. F. Lynch
Feb.				
March				
April				
May				
June				
July				

3320 17

Dis. 27/8/17 RO 18/9/17 WB 21/8/17

ACCOUNT CLOSED

DATE..... PER.....

YAR-0

ASSIGNED PAY.

L. L. Job 4503.—M. & D. 6832.

MILITIA AND DEFENCE

M. F. W. 11.
50m.—6-16.
H. Q. 1774-39-318.

SEPARATION ALLOWANCE

Name Martha Ball wife

Address ~~63 Ann Street~~ 52 Yorkley St Toronto. Ont.

16/5/17 P.A.L.

APR 1917

Name of Soldier Ball George Stanley

Regtl. No. 273434

Rank Pte

Corps 216th Bn

~~Relation to Soldier~~ / ~~wife, child or mother~~ } 15.00

To what Corps belonging when called out }

PAYMENTS

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

CONSOLIDATED ACCOUNT 1

COPIED FOR 2 CASUALTIES.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2 Martha Ball (Assignee) wife

Name of Soldier Ball George Stanley

273434, P.O. 256 "Bn

L. L. Job 5470—Req. 6888.

15.00 APR 1917

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May		H 12500	30	52 Dudley St Toronto 1 1/2 mg
June		D 17306	15	15 B.
July		W 22197	15	15
Aug.		~~X 26925~~	15	Cancelled 60.00
Sept.			15	15
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

A/c Closed 31-7-17
75-00
Ret'd per Justice
Date 18/7/17 F. X 21/8/17
Clerk GH

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname Christian Name

Regimental Number Rank

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Address (in full)

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

L.L. 53961—M. & D. 9721

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

M. F. W. 127
300M-1-19
1772-39-1140

Remarks:

File No. 184 G-6
12-7-19

WAR SERVICE GRATUITY.

Register No. B520.

Reg. No. 272434. Pte. 216th Bn

Name Ball. George Stanley

Address 1171 Dundas West
Toronto
Ont

Pay Soldier $ 119.90

L.T. Col.
Greville
MacGregor
Clerk

S.D. sent Dependent

Dependent Mrs Martha Ball

Address 1171 Dundas West
Toronto Ont

Pay Dependent $ 122 100. 400

Days 122 Rate 70. Due 280.

Less P.D.P. credited 160.10 160.10

Less further Dr. Bal. or overpayment. 2.00 Award.

Net 119.90 237.90

R W 109
12-11-19
Amended

Date	Ck. Order	Ck. No.	Amount	Remarks.	Date	Ck. Order	Ck. No.	Amount.
09/7/19	3091	30/7/19 496044.	119.90		20.9.19	21437	523663	118.00
2					2			
3					3			
4					4			
5					5			
6					6			

495-D.P.-100M-6-19 (10248).

GEN'L AUDITOR
Posting checked by
.....
Date. 29-7-19

File to Inv
12-7-19

Dec'n No 19443/387 W. S. G. File No 784-96

Award ..... days at $ .... per day $

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

Less P, D. P. Credited $ .....

$

Less further debit balance $ .....

Net due paid as below

TO SOLDIER TO DEPENDENT

O	Ag. No	Ch. No	Amount	Ag. No	Ch. No	Amount
1						
2						
3						
4						
5						
6						
	Total			Total		

1171 Dundas St. E.
Toronto

Not Eligible.

CHH

19443-387

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

784-G-1

Name **Ball, George Stanley**
Surname Christian Name

Regimental Number **273434** Rank **Pte.**

Unit **1st C.O.R.D.**

Original Unit

District where paid **Ottawa**

Date of Discharge **27-8-17**

P. D. P. Filing Number 19B24

Address (in full) **52 Foxley St.**
Toronto, Ont.

Change of address -
205 Ossington Ave.
Toronto, Ont.

Rates:—Regimental pay $ **1.00** per diem: Field Allowance $ **.10** per diem. Separation Allowance $ **20.00** per month.

L. L. 22573—M. & D. 8009.

	Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
		Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
	160 10	4497	26/9/17	53 00	4378	26/10/17	53 00	4302	28/11/17	54 10		160 10

M. F. W. 127.
50M—6 17.
1772 39-1140.

Remarks:

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 .....
$100.10 = 3 mos. pay. Wife received nothing.

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

21. Have you, during the present war, served in the Imperial Forces ? ..... No. .....

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled ..... No. .....

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England ? ..... No. .....
(b) If so, was such reversion in consequence of misconduct or inefficiency? ..... No .....

24. Are you now serving in the C.E.F.? ..... No ..... If not, give:—(a) Date of discharge ..... Aug. 27th 1917 ..... (b) Reason for discharge ..... Physically unfit for service .....

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit ..... No .....

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit ..... No .....

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? ..... No.
(b) If so, are you in receipt of full pay and allowances from that Department ? ..... No .....

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

Signature of Applicant: George Stanley Ball

Place of Residence: 1171 Dundas St. West Toronto

Declared before me at: Toronto

This 8th day of January 19.19

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

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent
P.M.P. Ottawa		

Certified Correct.

A.H. Baumarh
District Paymaster.

CAPTAIN C.A.P.C., C.E.F.
for PAYMASTER, MILITARY DISTRICT No. 2

War Service Gratuity	Net amount due

794 G4
784-G-4

B520

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

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

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

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

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

1. Christian names George Bowley 2. Surname Ball

3. Rank Pte. 4. Original Unit 216th Batt. Bantams. 5. Reg. No. 273434

6. Address, in full, to which future payments of gratuity are to be forwarded
1171 Hendas St. East. Toronto Ont.

7. Date of enlistment in the C.E.F. April 14th 1916

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Martha Ball

9. Relationship of such dependent wife

10. Address, in full, of such dependent 1171 Hendas St. East Toronto.

11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? No

12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
216th Batt. Apr. 14th 1916 — Aug. 27th 1917.
In Eng. from Apr. 14th 1916 — Aug. 27th 1917

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? Yes No

14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service No.

15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served
In 216th Batt. from Apr. 14, 1916, to Aug. 27th 1917

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.

M.F.W. 2595.
1772—39—1389.
1160—D.P.—250M-12-18.

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				

DEPT. OF MILITIA & DEFENCE
DEC 12 1917
CANADA

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 216TH OVERSEAS BN., C.E.F.

~~Regimental No.~~ 273434 Rank Private Name Ball George Stanley.

Enlisted (a) Apr. 13/16 Terms of Service (a) C. E. F. Duration of War + six months after Service reckons from (a) Apr. 13/16.

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) (A) Waiter.

Report: Date	Report: From whom received	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.
		Embarked	Halifax	18-4-17	
		Disembarked	Liverpool	29-4-17	
30-4-17	O.C. 216th Bn.	Transferred to 3rd Can. Res. Bn.	West Sandling	30-4-17	Part 11 B.O. 90 C. H. Mullen Adjutant for Lieut. Colonel O. C. 216th Can. Bn.
5-5-17	O. C. 3rd.	Taken on strength of 3rd Can. Res. Bn.	West Sandling	30-4-17	Part 11 B. O. 122
28-6-17.	O. C. 3rd	S.O.S. to 1 C O R D.	W. Sandling	28-6-17	Pt 11. B O 176. O. Mackenzie Lt. Col. O.C. 3RD RESERVE BN. C.E.F.
29-5-17	1st C.O.R.D.	T.O.S. 1st C.O.R.D. & reported to 3rd. Res.	West Sandling	29-5-17	Pt. II D.O. No. 81
29-6-17	-do-	Att. to C.M.D. Buxton	-do-	29-6-17	Pt II D.O. No. 112
28-7-17	1st C.O.R.D.	S.O.S. on discharge to Canada	West Sandling	18-7-17	Pt. II D.O. No. 140 C. H. Mullen Lieut. & Asst. Adjt. for O. C. 1st C.O.R.D.

(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. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.	
6.					52 Dockyard St. Toronto Ont	
	Dis Dep	Finally Discharged	Quebec.	27-9-17	NR 320.	

For
2353—10

G.C. Name BALL. George Stanley. Reg'l No. 273434.

Unit 216th. Bn. to 1st. Cent. Ont. Regt. If in perm. Corps / What Unit? Married or Single Married.

Place and Date of Enlistment Toronto. 13th. April 1916. Place of Birth Manchester. Eng.

Name and Address, Next-of-Kin Martha Ball.

63 Ann. St. Toronto. Ont. Canada. Relationship Wife.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

H. W. V., Ld.—9546-16.

N/C R.B No 5414
F.H.o R.L.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
		ARRIVED IN ENGLAND 29 4 17 S.S. SCANDINAVIAN			
5-5-17	3 Res Bn	To S.	Sandling	30.4.17	- 122
27-5-17	do	S.O.S. to 1 CORD & attch to 3 Res	do	23.5.17	- 140
29.5.17	1 CORD.	T.O.S from 3 Res Bn attch 3 Res	do	23.5.17	- 81
25-5-17	3 Res	Ad Moore Bts Hospl	do	22.5.17	- 143
9-7-17	"	discharged from Hosp	do	27.6.17	
27-6-17	3 Res	Ceased to be attched	do	26-5-17	- 169 (108/26.6.17 1 CORD
28/6/17	3 Res Bn	S.O.S having been boarded for disch to Canada	do	27.6.17	- 176
29.6.17	1st CORD.	On Ceas to be att to 1 CRD.	do	27.6.17	Pte D 6 112
27.7.17	do	Ceases to be att to 1 CRD and S.O.S to Canada Mth	M. Sling	18.7.17	" 140
29-10-17	1 COR 3 Res	Invalid to Can ex No 1 C.G. Hosp.		27-6-17	C L 6 49

From Halifax. Per S.S. [redacted] "Scandinavian" April 18th 1916

MARRIED Yes. SINGLE WIDOWER

TRADE OR CALLING Waiter. RELIGION Church of England

DESCRIPTION.

APPARENT AGE 41. YEARS 5 MONTHS

HEIGHT 5 FEET 1 1/4. INCHES

CHEST MEASUREMENT 32 1/2 INCHES EXPANSION 2. INCHES

COMPLEXION Dark. EYES Brown HAIR Black.

DISTINGUISHING MARKS Scar on left calf.

MEDICAL EXAMINATION. PLACE Toronto. Ont DATE April 13th 1916.

Present address 63 Ann St. Toronto. Ont.

649-B-1816

SURNAME. Ball.

S.O.S. D18

CHRISTIAN NAMES George Stanley

24-8-14 E

REGL. No. 273434. RANK pte

UNIT 216th Bn.

FORMER CORPS " Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Ball. Mrs Martha

RELATIONSHIP TO SOLDIER wife.

ADDRESS 63 Ann St. Toronto. Ont.

COUNTRY OF BIRTH England. Manchester DATE Nov. 29th 1874

PLACE OF ATTESTATION Toronto. Ont DATE April 13th 1916.

O/S 18/4/17

Pte. 4. M.G. Res 61. 1-8-17

No. 223434 RANK Pte. NAME Ball G. S.

T. O. S. 13-4-16 UNIT 216th Battalion
Do. 27-14-4-16

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PARTICULARS	AUTHORITY
1916	1916			
Apr 13	Apr. 30	✓		
May		✓		
June		✓		
July		✓		
Aug.		✓		
Sept.		✓		
Oct.		✓		
Nov.		✓		
Dec.		✓		
1917				
Jan 1	Jan 31	✓		
Feb.		✓		
Mar.		✓		
Apr. 1		N.		

UNIT SAILED
APR 18 1917

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

FORM R. 149.
7106—250m—7/2/17.

Name Ball George Stanley Rank Pte Reg. No. 293434

Unit 3rd Reo

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
22.5.17	Mone D/Ko	St Cliffe	N.Y.D.[illegible]	102		
27.6.17	Disch do	do	do	102		

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

FORM R. 149.
7106—250m—7/2/17.

BALL George Stanley

Name ~~BULL~~ BALL. G. T. Rank Pte. Reg. No. 273434

Unit 3rd Res Bn.

Next of Kin Unverified. CANADA

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
23-5-17.	Moore Bks.	Saliffe.	Indigestion.	75		
27-6-17	Discharged Canada (Ex letter Hsp)	do	Cay			

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
75. 6.49 (3)	Moore Bks Can Shorncliffe. & #11 Can. Gen., (Shorncliffe) Invalided to Canada	23-5-17. 27-6-17.	Indigestion " " St. Cent. Ont.

MDS (2)

NAME Bull, G. T.

REGT'L. No. 273434

H. Q. FILE No 649

RANK AND CORPS Pte 3rd. Can Res Bn

FOLLOWS No.

FOLLOWS

CABLE

NO.	DATE

NATURE OF CASUALTY

273434

216 Bn.

Ball, George, Stanley.

L. L. 18950—M. & D. 7789

M. F. W. 42—30M.—4-17.
H. Q. 1772-39-893.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
102.	Moore Bk Sloan Sloane	22-5-17	N.Y.D.
102.	Disc.	27-6-17	Not stated.

NAME Ball, G. S.

REGT'L No. 273434

RANK AND CORPS Pte. 3rd Can. Rio. Bn.

H. Q. FILE No. 649.

FOLLOWS No.

FOLLOWS

CABLE

NO.	DATE

NATURE OF CASUALTY

L. L. 20497—M. & D. 7908

M. F. W. 42—50M.—5-17.
H. Q. 172-39-893.

FORM D.M.S. 1300.
8137—50m—28/2/17.

Surname Ball Christian Name or Names GS 273434 Reg. No.

Rank Pte Unit 3rd Con Reserve Bn Co. Troop Batty.

Hospital Moore Bks, Shorncliffe Date of Admission 22-5-17

Transferred Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis N.Y.D.Q.

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Ch 9-7-17 # 102.

Date Duck 27-6-17

REMARKS

A.M.D. 2 DEPT.
Bch Bch. of D.G.M.S. C.M.F. London

EPITOME OF HOSPITAL TREATMENT.

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

a.m.m. Hist

Number 273434 Rank Pte.

Surname BALL

Christian Name George Stanley

Units 1 C.O.R. Theatre of War England

Date of Service 29-4-17

Remarks

Latest Address ~~n.a. 28-7-21~~ 205 Ossington Ave Toronto, Ont. 7-3-23

Roll No A page 3846

200m.-6-21.

~~744 G4~~
784-R-4

B 520

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Orders-in-Council (P.C. 3165), dated 21st December, 1918, as amended by P.C. 285, dated 8th February 1919, and P.C. 1168, dated 23rd June 1919.

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

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

On completion this Declaration is to be returned to THE ASSISTANT DIRECTOR PAY SERVICES OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Reg. No. 273434 2. Rank Private 3. Original C.E.F. Unit 216th Battalion
4. Christian Names George Stanley 5. Surname Ball
6. Address, in full, to which future payments of gratuity are to be forwarded
1171 Dundas West Toronto

7. Give the following particulars of service with Pay and Allowances for each enlistment which you have had in the Naval or Land Forces of Canada or the British Empire on or since the 4th August, 1914. Answer in the following order in space allotted.

	Regt. No.	Rank on Enlistment.	Unit. (State whether Active Militia, Permanent Force, C.E.F. or Naval. If R.A.F. state Wing.)
		CANADIAN SERVICE.	
1st Enl.	273434	Pte	216th Bn C.E.F.
2nd Enl.	Does		
3rd Enl.	Not		
4th Enl.	Apply		
		IMPERIAL SERVICE.	
Imp. Enl.			

	Date of Enlistment.	Date of Discharge.	Rank on Discharge.	Unit from which discharged	Place of Discharge.	Reason for Discharge.
		CANADIAN SERVICE.				
1st Enl.	13 Dec 1916	Aug 1917	Pte	3 Reserve	Quebec	Physically unfit
2nd Enl.		Does				
3rd Enl.		Not				
4th Enl.		Apply				
		IMPERIAL SERVICE.				
Imp. Enl.						

M. F. W. 2535 (b)
494-D.P.-100M-6-19.
1772-39-1389.

8. (a) Did you revert overseas to a rank lower than the temporary substantive rank held by you on your arrival in England? No (b) If so, give date and ranks and state if such reversion was in consequence of misconduct or inefficiency
Does not apply

9. 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.
2/6th May 1917 to Aug 1917

10. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? No

11. Have you been issued with a War Service Badge? If so, give number and class 'B'
6.1408

12. Are you at present a member of and in receipt of pay and allowances from any Canadian Naval or Land Forces? If so, give unit No

13. 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, from where paid, and on what dates Ottawa $100.00 My wife did not receive her portion of P. D. pay

14. Are you entitled to receive, or have you received any payment in the nature of Post Discharge Gratuity from the Imperial Forces? If so, state amount received, or to which you are entitled
No

15. Were you at the time of enlistment a civil employee of the Dominion or a Provincial Government? If so, state what Government, what Department, and whether civil pay was issued on your account while you were on active service No

16. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-Establishment? No
(b) If so, are you in receipt of full pay and allowances from that Department? No

17. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Martha Ball

18. Relationship of such dependent Wife

19. Present address, in full, of such dependent 1171 Dundas St West Toronto Ont

20. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? If so, give his regimental number, rank, unit and full name
No

REMARKS

P.D.P. Ottawa

No reserve Toronto

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 by virtue of the Canada Evidence Act.

Signature of applicant: George Stanley Ball

Place of Residence: 1171 Dundas St West

Declared before me at: Toronto Ont Toronto

This 2nd day of July 1919

Signature of Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Adminstration of Oaths. Geo. Crayton

NOTICE.—If the dependent has not forwarded a Statutory Declaration to Ottawa, in connection with Separation Allowance, it will be necessary to forward one with this application. These are for wife, M.F.W. 148, mother, M.F.W. 147, and guardian, M.F.W. 149, and may be obtained from the Assistant Directors Pay Service, or the Patriotic Fund. Guardian forms must be completed by the **present** guardian.

Space below this line to be used only by the Assistant Directors Pay Service.

POST DISCHARGE PAY.

Dates paid.	Amounts paid soldier.	Amount paid dependent.

REMARKS

Certified correct. A H Bancroft Lt

Assistant Director Pay Services, Mil. Dist. No. 2

Date

A.P. 784-G-6.

Paymaster General's Branch.
FEB 10 1919
Militia Headquarters, Ottawa.

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

OTTAWA, CANADA. 19443

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

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

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

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

1. Christian names George Stanley 2. Surname Ball
3. Rank Private 4. Original Unit 216th 5. Reg. No. 273,434
6. Address, in full, to which future payments of gratuity are to be forwarded 1171 Dundas St. West, Toronto
7. Date of enlistment in the C.E.F. 13th April 1916
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Martha Ball
9. Relationship of such dependent Wife
10. Address, in full, of such dependent 1171 Dundas St. West, Toronto
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? No.
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
216th Battalion
13th April 1917 to 1st August 1917
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? No
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service No
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served
13th April 1916 to 27th August 1917
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.

M.F.W. 2595.
1772—39—1389.
1160—D.P.—250M-12-18.

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 .....
One Dollor Ten Cents a day for 3 months $100 10/100
Wife received no Seperation Allowance during these 3 months

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

21. Have you, during the present war, served in the Imperial Forces ? ..... No .....

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled ..... No .....

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England ? ..... No .....
(b) If so, was such reversion in consequence of misconduct or inefficiency ? ..... Not applicable

24. Are you now serving in the C.E.F.? ..... No ..... If not, give:—(a) Date of discharge 27th August 1917 ..... (b) Reason for discharge ... no longer physically fit for war service .....

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit ..... No .....

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit .....
..... No England Only .....

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? ... No
(b) If so, are you in receipt of full pay and allowances from that Department ? ..... No

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

Signature of Applicant: George, Stanley, Ball

Place of Residence: 1191 Dundas St. West, Toronto

Declared before ~~me at~~ Toronto Ont

This 5th day of July 1919

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

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent
26-9-17	$ 53.00	
26-10-17	53.00	
28-11-17	54.10	
	$ 160.10	

Certified Correct.

11-2-19. Soldier

~~District~~ Paymaster.
Ottawa

War Service Gratuity	Net amount due

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
Thorncliffe 22.6.17	Chronic Indigestion Discharged. H B Thomson Capt.

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

ARMY FORM B. 178.

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

Copy

MEDICAL HISTORY of

Surname Ball *Christian Name* G S

TABLE I.—GENERAL TABLE.

Birthplace ... Parish _____ County _____

Examined ... ... on _____ day of _____ 191 ,
at _____

Declared Age ... ... _____ years _____ days.

Trade or Occupation ... _____

Height ... ... _____ feet _____ inches.

Weight ... ... _____ lbs.

Chest Measurement — Girth when fully Expanded _____ inches.
Range of Expansion _____ inches.

Physical Development ... _____

Vaccination Marks — Arm ... Right _____ Left _____
Number _____

When Vaccinated ... ... _____

Vision ... ... R.E.— V= _____
L.E.—V= _____

(*a*) Marks indicating congenital peculiarities or previous disease ... (*a*) _____

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

Approved by (*Signature*) _____
(*Rank*) _____
Medical Officer.

Enlisted ... ... at _____
on _____ day of _____ 191 .

	Corps.	Regtl. No.
Joined on Enlistment ...	316th Bn	393rd Inf
Transferred to		

Became non-effective by ... _____

on _____ day of _____ 191 .

(*Signature*) _____
(*Rank*) _____

(5442.) W. 13920/M39. 400M. 12/15. C. P., Ltd. Forms B 178 39

P.T.O.

5313

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				

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.

19. Is the invalid fit for

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

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 be discharged. (When not for discharge add special recommendation.)

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..... K.C. Cairns, Capt. A.M.C. *President.*

Haig, Capt.

DATE..... Coughlin, F.J. Lieut. } Members

W.M. Carrick MJR.

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.

President.

PLACE.....

DATE..... } Members

APPROVED BY

Assistant Director of Medical Services.

DATE.....

APPROVED BY

Director-General of Medical Services.

DATE.....

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 Copied from Halifax Board DATE Jan. 7, 1919.

1. 1 (*a*) Unit 216th 1st C.O.R.D. (*b*) Regimental No. 273434 (*c*) Rank Pte.

(*d*) Surname BALL (*e*) Christian name Geo. S.

(*f*) Home address 52 Foxley Street, Toronto, Ont.

(*g*) Next of Kin M. Ball (*h*) Relationship Wife

(*i*) Address of Next of Kin 52 Foxley Street, Toronto, Ont.

2. Age last birthday 43 Date of birth.....

3. Enlistment, or Appointment (if an Officer) (*a*) Place Toronto (*b*) Date 13-4-16

4. Personal description:

(*a*) Height 5' 1½" (*b*) Weight ..... (*c*) Complexion Dark (stripped)

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

5. Former trade or occupation Waiter

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	Periods From	Periods To
Canada				
England				
France or other theatres of War				

7. Original disease, or injury.....

(*a*) Date of origin..... (*b*) Place of origin.....

(*c*) Cause Notify: do Chronic gastritis not due to service.

M. F. B. 227.
300M.—8-18.
1772-39-117.

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.)

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.)

About five years ago (prior to enlistment) soldier began to have pains in stomach. Now he has a belching of gas, regurgitation of mouthfuls of sour fluid. Gastric analysis, mucus plus free HCL 40. total acidity 56.

Radiographic report:- Irregular area on greater curvature. Position good. He is under size and weight. He has never done full duty in the army and is as well as on enlistment and not liable to be of any service in the army. Hear and lungs 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.....Cardio-Vascular System.....Genito-Urinary System.....
(If pulse rate is abnormal, B. P. will be taken.) (Albumen and Sugar will be excluded.)

Special Senses.....Respiratory System.....Integumentary System.....

Disturbances of Mentality.....Digestive System.....Muscular System.....

Osseous and Joint Systems.....Any other general condition.....

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

10.—(*b*) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (*a*).)

(*c*) (Here give a description of wounds, scars and deformities.

11.—(*a*) Did the disabling condition have its origin before enlistment?

(*b*) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment?
The regimental documents will be referred to.
(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

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

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

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?
(If the answer is "yes" state nature of treatment required and probable duration)

16. Can the former trade or occupation be resumed?
(If not, briefly state why)

17. Recommendations.....

Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

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

I complain in addition of.....

G.S. Ball. .....Rank.
Signature of invalid examined.

LIST OF DISCHARGE DOCUMENTS.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

This space to be left blank for the Chelsea Number.

Army Form B. 268.

Proceedings on Discharge.

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

No. 243434 Army Rank Pte.

Name Ball G. S.

(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps 1st Depot C. G. D.

Battalion, Battery, Company, Depôt, &c.

(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge

Place of discharge

DISCHARGE DEPOT AUG 27 1917 QUEBEC

1. *Description at the time of discharge.*

Age 43 years months

Height 5 feet 11½ inches

Chest measurement { girth when fully expanded 31 ins. / range of expansion 2 ins.

Complexion dark

Eyes brown

Hair dark brown

Trade Painter

Intended place of residence (To be given as fully as practicable) 2 / Toronto S-2 Fonley St.

Descriptive marks.

ptosis left eye lid
scar on left calf

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of

Para. 392, Sec. 16, K. R. & O. 1912.
Being no longer physically fit for war service.

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

To be filled in on the soldier quitting the Colours.

3. Military character :— Documents not available.

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

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

Lieut.-Col.
Commanding Canadian Discharge Depot.

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

* Strike out if not applicable.

D. D. & L., London, E.C. A4302 Wt. W2717/M291 500,000 8/16 Sch. 30 Forms B. 268 40

[OVER.

W.S.b Comp 14-2-19 RC

Rec. det 17-8-17 JMB

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

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

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

6. Campaigns, Medals and Decorations — Local

Certificate of education .....

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

(Place) CANADIAN DISCHARGE DEPOT 12 JUL 1917 BUXTON

(Date) _____

Kirkus Major
Lieut.-Col.
Commanding Canadian Discharge Depôt.

Commanding _____ *Battn.* _____ *Regiment.*

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

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

(Place) DISCHARGE DEPOT AUG 12 1917 QUEBEC

(Date) _____

G. S. Ball (*Signature of Soldier.*)

Gilbert (*Signature of Witness.*)

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

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

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

_____ (*Signature of Soldier.*)

10. *Statement of service.*

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

Further service „ „ _____ (the date of confirmation of discharge) ... ... _____ „ _____ „

Total ... _____ „ _____ „

11. *Confirmation of discharge.*

The discharge of the above named man is hereby confirmed for AUG 27 1917 (date)

(Place) DISCHARGE DEPOT AUG 12 19[illegible] QUEBEC

(Date) _____

Signature W. Warrior Lt.-Col.
Comd'g. Discharge Depot Quebec.

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

RESERVATIONS REFERRED TO AT PARA. 8.

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

None.

G. S. Ball

P. 559.
MARRIED OR SINGLE Married.
PLACE OF BIRTH Manchester
NAME AND ADDRESS OF NEXT OF KIN Ball Martha
63. Cann Street. Toronto
RELATIONSHIP OF NEXT OF KIN wife.
NAME AND ADDRESS OF NEXT OF KIN
RELATIONSHIP OF NEXT OF KIN
SEPARATION ALLOWANCE MONTHLY $ 20.00 EFFECTIVE (DATE)
PAYABLE TO Ball Martha
RELATIONSHIP OF DEPENDANT wife.

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 273434 RANK Private NAME Ball, George. Stanley. O
IF IN PERMT. CORPS WHAT UNIT | UNIT 216th BATTALION, C.E.F.
TRANSFERRED TO 3rd Res Bn. DATE 1/5/17 AUTHORITY 5/5/17
PERMANENT FORCE ALLOWANCES
TRANSFERRED TO LRC Bch DATE 29.6.17 AUTHORITY MB 21330 27.6.17
PLACE OF ATTESTATION Toronto
TRANSFERRED TO K. Dept DATE 29-6-17 AUTHORITY do
DATE OF ATTESTATION 13 April 1916
TRANSFERRED TO NE. DATE 29.6.17 AUTHORITY

ASSIGNED PAY MONTHLY $ 15.00 DATE EFFECTIVE
PAYABLE TO Ball, Martha 63 Cann Street, Toronto RELATIONSHIP wife
ASSIGNED PAY MONTHLY $ DATE EFFECTIVE
PAYABLE TO RELATIONSHIP
STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stopped EFFECTIVE 1-7-17 REASON Disch. to Canada
DISCHARGE DATE AND PLACE 28-6-17 Canada REASON AND AUTHORITY Discharged Military Hosp. 2 B/30 27-6-17
ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) Invalided unfit
ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

RECEIVED MAY 28 1917 M.D. 2 MILITIA HEADQUARTERS CANADIAN CONTINGENTS

Entered on N.P. Card Index
Checked by [illegible]

DATE 1917.	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT C.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT C.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT C.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 NO	1 DATE	2 No.	2 DATE	3 NO.	3 DATE	4 No.	4 DATE	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
May	Balance from Canada													19-	19-															19-				
1/31	31	1.00	34	10											34 10												15.		15.	38 10				
1.28	28		30	80											30 80												15		15	53 90				
Sep.															83 90	459	12/7/17	(Buxton)					93						93	44 17				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	A/C PER PAY ENG.
Oct/17	Balford	44 17							44 17	
				DRQR 358 3rd Res. 19/5/17	4 87					
				- 830 26/6/17 N.B.H.	3 51	3 51			9 36	
				Balance transferred to N.E. Branch					01	
N.E. Dec	Cashier's ½	9 34		Cashier -	01				Till	

To LRC Bch 29/6/17
MB 21330 27/6/17

A3M. FORM REN. 2/6 EFFEC. 1-7-17
DISCHARGED TO Can. DATE 28/6/17
PAYBOOK VERIFIED 28/6/17
6 BAL. 126 L.P.C. REN. 28/6
AUTHY D.B.H. 2 B/30 27/6

Checked A.B. Williams L.P.C.

Sailing List #42 18/7/17 D. Bal # 9.37

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS	
	NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.				1 NO.	1 DATE	2 NO.	2 DATE	3 NO.	3 DATE	4 NO.	4 DATE	1	2	3	4				CREDIT	DEBIT			

PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at Prior Park, Bath, England, on the ____ day of ____ 191

Members of Board.

Proceedings.

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

Signed at Prior Park, Bath, this *day*

of , 191 .

President.

Mair
Local

Army Form B. 179.
Canada.

Medical Report on an Invalid.

MOORE BARRACKS,
CANADIAN HOSPITAL,
SHORNCLIFFE.

Station

Date June 21st 1917

1. Unit. — 3rd Reserve.
2. Regimental No. 273434
3. Rank Pte
4. Name Ball, George.
5. Age last birthday 43
6. Enlisted { on 13-4-16 / at Toronto Canada
7. Former Trade or Occupation { Waiter

8. **Disability.** Chronic Indigestion Chronic Indigestion

Statement of Case. 111

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

9. Date of origin of disability. — 1912

10. Place of origin of disability. Winnipeg Canada

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.
History of dull pain and heaviness in epigastrium, Distress in epigastrium and flatulence especially at night. Palpitation & precordium Belching of gas. Regurgitation of sour mouthfuls Cannot eat heavy diet & sweets Heavy diet does not agree with patient This man has not done full duty since joining the army.

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

(*b*) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. (*See notes on page 3*). (1) No (2) Army diet has increased condition

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

13. What is his present condition?

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

This man is poorly developed and Underweight. Nervous ~~Depressed~~ Depressed Hysterical Has existed Inert to treatment Tongue clear. Teeth – Both sets false Heart – neg – Lung – neg Abdomen Pigment. Stomach & Intestinal tract Distended with gas Gastric analysis Mucus + Free HCl 40. Total acidity 52 Blood neg. Radiographic report Stomach outline, Greater Curvature Irregular Rugae Empties in 3 hours Position Good. Intestinal tract filled and empties Normally.

14. If the disability is an injury, was caused

(*a*) In the presence of the enemy? Not applicable

(*b*) On active service?

(*c*) On duty?

(*d*) Off duty?

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

If so—(*a*) When? Not applicable

(*b*) Where?

(*c*) Opinion?

16. Was an operation performed? If so, what? Not applicable

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

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service? Not applicable

19. Do you recommend

(*a*) Fit for duty? No

(*b*) Fit for base duty? No

(*c*) Invalided to Canada? No

(*d*) Discharge as permanently unfit? Yes

E. E. Cleaver Capt A.M.C.

Officer in medical charge of case.

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

MOORE BARRACKS, CANADIAN HOSPITAL, SHORNCLIFFE

Station

Walter A. Bates COLONEL O.C. MOORE BARRACK OFFICER i/c CANADIAN HOSPITAL SHORNCLIFFE

Officer in charge of Hospital.

Date 19-6-17.

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

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

Opinion of the Medical Board.

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

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

(iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (*see* Articles 641 to 648 of the Canadian Pay and Allowance Regulations).

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

20. (*a*) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. I No, II No

(*b*) If due to one of these causes, to what specific conditions do the Board attribute it? not applicable

21. Has the disability been caused or aggravated by

(*a*) Intemperance? No

(*b*) Misconduct? No

22. Is the disability permanent? Impossible to say

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

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present? 3/4: One half of which is due to aggravation.

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

25. If an operation was advised and declined, was the refusal unreasonable? not applicable

26. Do the Board recommend

(*a*) Fit for duty? —

(*b*) Fit for base duty? —

(*c*) Invalided to Canada? —

(*d*) Discharge as permanently unfit? Yes. Discharged.

27. Remarks.

Signatures:—

A. B. Thomson Capt A.M.C. President.

Station M.B.C.H.

Date 21/6/17.

G. G. Paine Capt Can. M.C. } Members.

Approved.

Station SHORNCLIFFE—

9, Westbourne Gardens, Folkestone.

Date 22 JUN 1917

FOR A.D.M.S., CANADIAN CORPS.

Administrative Medical Officer.

Date of Enlistment

13-4-16

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

Apr 1, 1917.

RATE OF SEPARATION ALLOWANCE

20			

RATE OF ASSIGNMENT

15-			

PARTICULARS OF SEPARATION ALLOWANCE

No. 273434.

Rank Pte. Promoted Reverted Discharge

Soldier's Name Geo. Stanley Ball.

Battalion 216 Batty.

Beneficiary Martha Ball

Relationship Wife

Address ~~63 Isabella, Toronto, Ont.~~

PARTICULARS OF ASSIGNMENT

Name Martha Ball (wife).

Address 52 Foxley St. Toronto, Ont.

Change of Address

1

2

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Sept 30		332 -	60 -	392 -	A.P a/c closed 31 7/17. Rebt 18 7/17. FX 21 8/17. S.A. " " 31 7/17 " " " "

M. F. W. 128
400m.—6-17—177-39-1141
L. L. 22320—M. & D. 7993.