REGIMENTAL DOCUMENTS

10398

NAME Belbeck Orville Leslie REGT. NO. 400085 UNIT Lasc H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
3	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
1	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
3	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
3	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob
	MEDICAL EXAMINATION (M.F.W. 129)					
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					DESERTION
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	Rec Card					
1	CD 3					
4	Insc Inst Dem					
1	Dent Cert					
5	B 139					
3	B 150					
2	B 178					
1	B 149					

M

M

H

W 2589
100M-11-15

card A.9

ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? ..... Orville Leslie Belbeck
2. In what Town, Township or Parish, and in what Country were you born? ..... Kenora Ont.
3. What is the name of your next-of-kin? ..... Mrs L. R. Belbeck (Mother)
4. What is the address of your next-of-kin? ..... 1124 Dallas Rd. Victoria B.C.
5. What is the date of your birth? ..... March 27. 1895
6. What is your Trade or Calling? ..... Chauffeur & Bookkeeper
7. Are you married? ..... Single
8. Are you willing to be vaccinated or re-vaccinated? ..... Yes.
9. Do you now belong to the Active Militia? ..... Yes.
10. Have you ever served in any Military Force? ..... No.
    If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? ..... Yes.
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? ..... Yes

O L Belbeck ..... (Signature of Man).

G A Bagnall ..... (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

O L Belbeck ..... (Signature of Recruit)

Date May 11th 1914. G A Bagnall ..... (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Orville Leslie Belbeck, 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.

O L Belbeck ..... (Signature of Recruit)

Date June 9 1914. R Macdonald ..... (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 Vernon B.C. this 9th day of June 1914.

..... (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

..... (Approving Officer)

Capt Camp

200 M.—8-14.
H.Q. 1772-1-13.

Description of Belbeck O. L. on Enlistment.

Apparent Age 20 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 9½ ins.

Chest measurement: Girth when fully expanded 35 ins.
Range of expansion 3 ins.

Complexion Fresh
Eyes Brown
Hair Brown

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

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).

no vac. mks.

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 May 11th 1914. C. R. W. Haughton Capt.

Place Victoria BC Alan Beech Capt. CAMC,
Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

Orville Leslie Belbeck 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.

(Signature of Officer)
Capt CAMC

Date 14th June 1914.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 400086 (Rank) Private

Name (in full) Orville Leslie Bellbeck enlisted in

the Canadian Army Service Corps

CANADIAN EXPEDITIONARY FORCE at Victoria on the 11th.

day of May. 19 15

HE served in England with Can Army Service Corps.

and is now discharged from the service by reason of Demobilization. ~~Medical Unfitness.~~

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

Age 23

Height 5' 9½"

Complexion Medium

Eyes Grey.

Hair Dark Brown

Marks or Scars 1 Vaccination mark left arm

O. L. Bellbeck

Signature of Soldier

T. N. Macdonald

Issuing Officer

Capt

Rank

Date of Discharge

20-12-19

Date 10-12-19 19

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

M.F.B. 39A.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

/

Forms
I. 1237
10

H 13.

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	400085	Pte	Belbeck	Leslie Orville

Year	Unit.	Age.	Service.
1916	C.A.S.C. SHORNCLIFFE	19	Home ~~Front~~ 9/12

Station and Date.	Disease
Monks Horton 3/2/16	Strained Knee

Getting out of car Jan. 19th twisted knee which became inflamed, no discolouration.
Sent to Moore Bks, same day.

Present Condition
Fit.

Return to unit —

J. W. Watson Capt Can M.C.

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

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

P.T.O.

Station and Date.	

Forms
J. 1237
10

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
424.	400085	Pte	Belbeck	L.
Year	**Unit.**		**Age.**	**Service.**
1916.	C.A.S.C.		20	$1\frac{2}{12}$ —

Station and Date.	Disease
Hastings 18-2-16.	Deform r. toe + Gonorrhoea. + Return to Shornecliffe. William Daunt MO

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

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

P.T.O.

Station
and Date.

[redacted]
1237
10

9895

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	400085	Pte	Bilbeck.	J L

Year	Unit.	Age.	Service.
1915	CASC	19	9/12

Station and Date.	Disease Inflammation right knee
MBH.	

Present Complaint
Pain & swelling in right knee.

Past History
Gonorrhea. about 4 mos ago.

Present Illness
was falling out of car & noticed that his knee joint was stiff. Carried on for two days. One morning when falling up found it impossible to move left at all.

Phys Exam.
Right knee joint badly swollen

Treatment
20% Ichthyol ointment applied. Leg to be fixed for three days

3/2/16 M.H.

TRANSFERRED.
A Burch Capt

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

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

P.T.O.

Station and Date.	

Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps C.G.S.C

Military Hospital M.B.C.H.

No. 400085 Rank and Name Pte. Belbeck O.L. Age 19 Service 9/12

Disease Date of admission Jan 19/1/16 Date of discharge Result

Dates of Observation	Jan																														
Days of Disease	19	20	21	22	23	24																									
Temperature Fahrenheit	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.

Pulse per Minute		80	72			68																									
R[illegible]irations per [illegible]inute		2	20			18																									
[illegible] 24 [illegible]s																															

(1002.) W9043—1195. 499,500. 1/15. K. & K. Forms/B. 181/3.

Signature ______ In charge of case.

51.

Forms
I. 1237
10

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
1-A231.	400085.	Pte.	Bilbeck	~~Alm.~~ O. L.

Year	Unit.	Age.	Service.
1917.	C. A. S. C. M.T. att. C. A. M. C.	22.	2 4/12

Station and Date.

Disease Facial Spasm.

Complaint: Deafness left ear; aching in left eye; headache.

Family history good.

Was a clerk; previous history good; enlisted May, 1915 at Victoria B.C.; to England Aug. 4, 1915; in Jan. 1916 had operation on extensor tendon small toe right foot, in Moore Bar. Hosp.

BP 125–78

Heart, lungs, liver, kidneys, normal.

30.4.17 Much improved.

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

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

P.T.O.

Station
and Date.

CLINICAL CHART.

Army Form B. 181

(*To be attached to Case Sheet.*)

Corps C.A.S.C. N.T. att. C.A.M.C. Military Hospital

No. 4000 8.5 Rank and Name Pte. Bilbeck O.R. Age 22 Service 2 4/12

Disease Facial Spasm Date of admission 13/4/17 Date of discharge 1-5-17 Result To Duty

Dates of Observation	April																														
Days of Disease	13	14	15	16	17																										
Temperature Fahrenheit	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.
107°																															
106°																															
105°																															
104°																															
103°																															
102°																															
101°																															
100°																															
99°																															
98°																															
97°																															
Pulse per Minute	80				76																										
Respirations per Minute	18				20																										
Motions per 24 hours																															

57.

(6201) Wt. W. 11421/M1165 2,000,000 12/16 McA & W Ltd. A.F.B. 181 (E. 735)

Signature M. Chapman In charge of case.

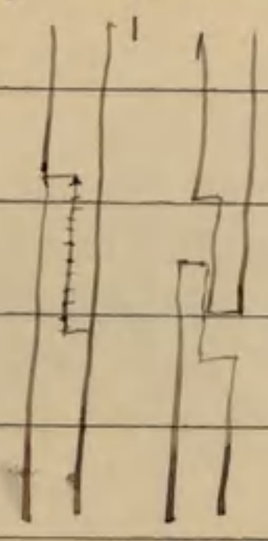
16604

Forms
I. 1237
10

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
16604	4000 85	Pte.	Belbeck	Leslie.
Year 1916	C.A.S.C.	Unit.	T.D.	Age. 20 Service. 13/12

Station and Date.	Disease Deformity of 5th toe R.
5/7/16.	Complaints:- Shoes tires the toe on walking.
	Duration:- 2 yrs.
	Personal History Hit by Hockey stick two years ago.
	Present Condition: 5th Metatarsal R foot, overlaps 4th Metatarsal. Gives pain when wearing heavy shoes. No enlargement or swelling.
6/7/16	On examination under anaesthetic the 4th toe was found to be an ununited fracture of the 2nd Phalanx, the 4 toe was amputated. L A Palmer Capt C.A.M.C.
7/7/16	Returned to Ward fit Condition Good.
	Exposed extensor tendon to little toe & lengthened it as per sketch. used fine chromic gut for sutures skin stitched with Linen. Iodine & Dry dressing. R A Bowie Major L A Palmer Capt.
15-7-16.	Discharged to Convalescent Hospital TRANSFERRED. 18 JUL 1916 Hastings R A Bowie

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

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

P.T.O.

Station
and Date.

CLINICAL CHART.

(*To be attached to Case Sheet.*)

Army Form B. 181.

Corps C.A.S.C. Military Hospital M.B.C.H.

No. 400085. Rank and Name Pte. Belbeck. Leslie. Age 20. Service 13/12.

Disease Malf. of Rt. Toe Date of admission July 5-1916- Date of discharge Result

Dates of Observation	6	7	8	9	10	11
Days of Disease	1	2	3	4	5	6
Temperature Fahrenheit	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.
107°		10				
106°						
105°						
104°						
103°						
102°						
101°						
100°						
99°						
98°						
97°						
Pulse per Minute	88	64				
Respirations per Minute	20	18				
Motions per 24 hours						

Urgent Tuberculosis Pyelitis

Signature J. H. Macdonald Major In charge of case.

(2669.) W9043—1195. 800,000. 12/14. C.P., Ltd. Forms/B. 181/3.

Form P. 85.

1918—60M—29-11-16.

100870

FORM OF WILL.

Name in full.

I O. L. Belbeck Pte

Regimental Number 400055 serving in Base

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

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

I DEVISE and BEQUEATH all my real estate unto

nil

absolutely, and my personal estate I bequeath to my mother

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

Rebecca Belbeck, Wife of Albert Belbeck,
1124 Dalas Rd
Victoria B.C.

Fill in Date and Year.

IN WITNESS WHEREOF I have hereunto set my hand this 8th day of Feb. A.D. 1917.

O. L. Belbeck
(*Signature*)

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

Name of Witness Hilario Poyto CAPT. PAYMASTER.

Address of Witness ONTARIO MILITARY HOSPITAL

Occupation of Witness Chas. C. Ramage

Name of Witness

Address of Witness ONTARIO MILITARY HOSPITAL, ORPINGTON, KENT.

Occupation of Witness Clerk.

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

Form [illegible].S. 1394.
7004.—100M.—5/2/17.

PROCEEDINGS OF A MEDICAL BOARD.

ONTARIO MILITARY HOSPITAL,
ORPINGTON, KENT.

Dated at ..... - 8 MAY 1917 1917

No. 400085 Rank Pte Name Belbeck D. L.

Local Unit CASC Overseas Unit ..... Age 22

Examination held at ORPINGTON

DISABILITY.
Overseas—Local
(scratch one out).

Nerve deafness
Facial paralysis

PRESENT CONDITION.

Just left hospital - facial paralysis with deafness of left ear, which will probably improve slowly.

B'''/'''

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 { Alex MacKay Maj Capt ..... President.
W H Crawford Major CAMC
.....

APPROVED

Dated - 8 MAY 1917 1917.

For A.D.M.S.
Canadian London Area

10.5.18 B II. Harley Smith

11.6.18. B II Confirmed. F. A. Leary Capt.

17.7.18 B II Harley Smith 10 Cy.

20.9.18 B II Harley Smithley.

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Belbeck Christian Name Orville Leslie

Examined on 11th day of May 1915 at Esquimalt B.C.

Birthplace City or Town Kenora County Ont.

Apparent age 20

Trade or occupation Chauffeur Bookkeeper

Height 5 Feet 9½ Inches.

Weight 145 Lbs.

Chest measurement Minimum 32 inches. Maximum expansion 35 inches.

Physical development Good

Small-Pox Marks ✓

Vaccination Marks Arm Right. Left. Number ✓

When Vaccinated last June 19th 1915

(a) Marks indicating congenital peculiarities or previous disease ✓

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

Approved by R. Gibson

Rank Capt. C.A.M.C. M.O.

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

21 JAN 1916

12 MAR. 1917

Date	Result	Vaccinations.	
19/VI/15	O.K.	J. Beggan	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
23/VI/15	O.K.	J. Beggan	M.O.
26/7/15	Positive	R. Gibson	M.O.
13/8/15	"	R. Gibson	M.O.
/12/15		A. Bogenwood	

Enlisted on 11th day of May 1915 at Esquimalt B.C.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	C.A.M.C.	400085		
Transferred to..	✓			

CANADIAN

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
16 C.G.H.	10.5.18	Syphilis	Hardly Diagnosis
13 Bunns L.	30/7/19	Diphtheria & V.D.S.	

The Medical History should be returned by the proceeding overseas, must be returned by the unit to the Record Office when they leave England.

Lieut.-Col. in charge of Records Canadian Contingents

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.

100M.—1-15.
H. Q. 1772-39-439.

Surname ..... Christian Name .....

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital.			Dates of Discharge from Hospital.			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.
		Day	Month	Year	Day	Month	Year				
Moore Barracks Hpl. Shorncliffe.		14	1	16	3	2	16	Infl. Rheumatic joint	15	Made Normal.	CAPT C.A.M.C. REGISTRAR.

Duplicate Med[illegible] posted to here.
Medical Registrar
Record Office.

C.A.D.C. 5009A

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

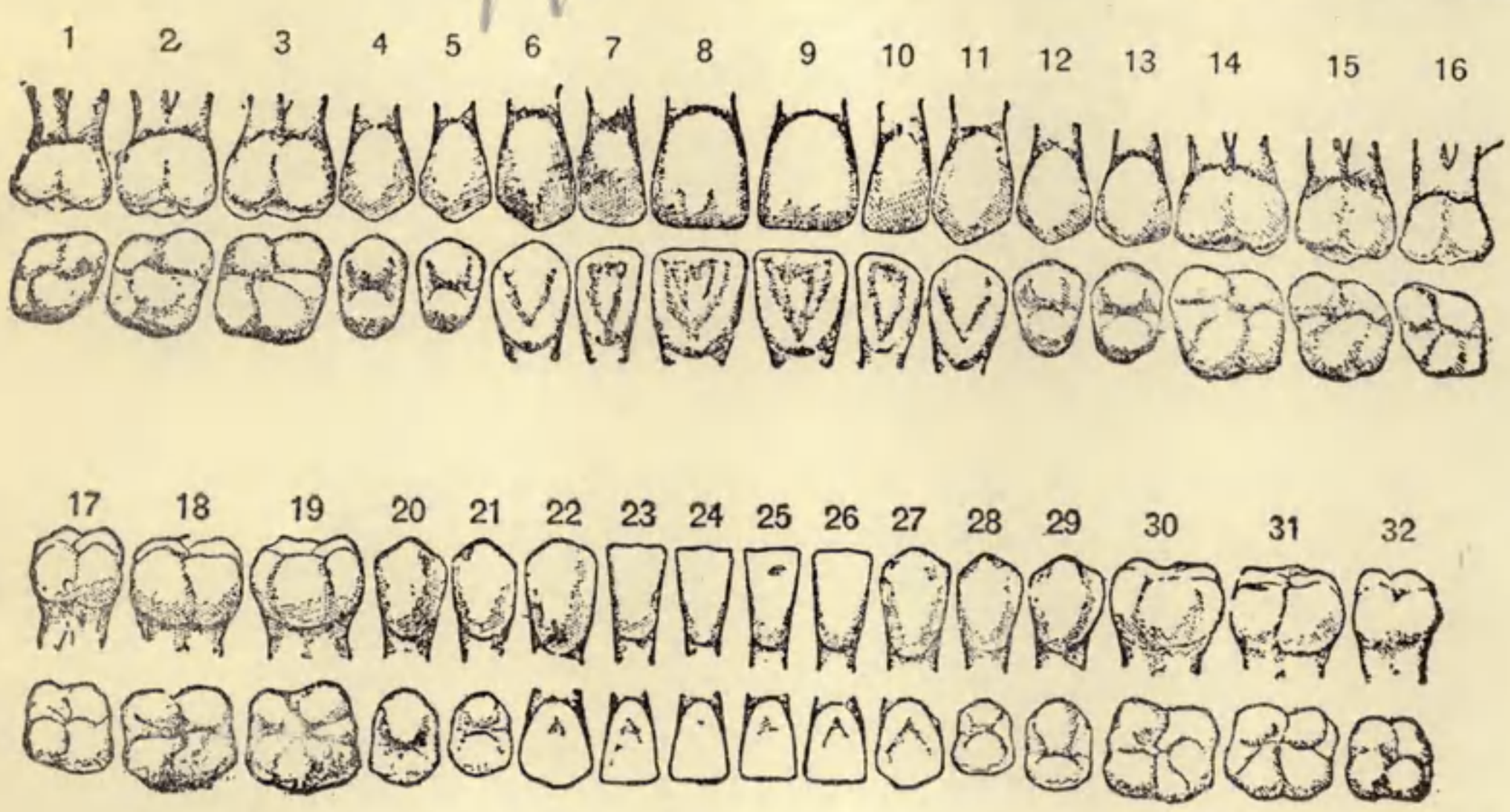
DIRECTIONS TO DENTAL OFFICERS

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

NAME OF SOLDIER (Block Letters) BELLBECK O.L.

REGIMENT C.A.S.C. RANK Pte No. 400085

Date of Examination in England 9/7/19 | Date of Examination in France



PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

Nil

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 No

(*b*) In England Yes

(*c*) In France No

A.H. McMeeker Capt
D.A.D.C.

P.792.
150M-10-2-19.

No. .....

AUTHORIZATION FOR ADVANCE OF PAY.

London, S.W. 1.

.... 19

From:- Officer i/c Sub-Division,

To:- Cashier,

Unit .....

Reg. No. .....

Name .....

Amt. Requested £.....

Leave Expires 191

You are authorized to pay marginally noted the sum of £ .....

.....

.....
Pay Sgt.

....
Supt. Clerk. O. i/c Sub-Division.

ACQUITTANCE.

A.S.P.B ATTACHED.

Paid in Cash by

.....
Cashier.

SOLDIER'S RECEIPT.

Received from Cashier, Canadian Pay Office, London, in Cash, the above mentioned amount.

.....
Receipt of Soldier.

9/10/19

Query. C.A.P.

Belbeck Claim has not been paid by allowance last four months.

Flat rate of £8-0-0 per mth in Cr.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
19.5.19	Cas. C.L.C.	Graded as 2nd Class storeman will draw 2nd Class Wkg pay	London	1.1.19	Part II 117
11-11-19.	casc. L.a.	S.O.S. to 2nd C.D.D.	London.	18-11-19.	Pt II D.O. 261.
					Major, O.C., C.A.S.C., London Area.
		TAKEN ON STRENGTH C.D.D. 18/11/19 PART II ORDERS No. 27			19/11/19
		S.O.S. Returning to Canada		28/11/19.	36 1/12/19
		CASSANDRA Embarked Glasgow 29.11.19 Disembarked HALIFAX 8.12.19			
		T. O. S. Halifax Depot Clearing Services Command 29.11.19 Part 11. Order No. 345 dated 12.12.19			
		S. O. S. Halifax Depot, Clearing Services Command, on being discharged from the Service under Demob'n. Daily Orders Pt. 11 No. 345 dated 12.12.19			20.12.19 R01420 CAPT & ADJUTANT HALIFAX DEPOT CLEARING SERVICE COMMAND for

Army Form B. 103.

Casualty Form—Active Service.

Regimental Number 400085

Regiment or Corps C A S C

Rank Pte. Surname Belbeck Christian Name L. W.

Religion C of E Age on Enlistment years months.

Enlisted (a) 11/5/15 Terms of Service (a) Dur of War Service reckons from (a) 11/5/15

Date of promotion to present rank Date of appointment to lance rank

Extended { } Re-engaged { } Qualification (b) Chauffeur or Corps Trade and Rate

Signature of Officer i/c Records.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		Embarked ...			
7/2/16	O.C. Case T.D.	Disembarked ... T.O.S. Case - T.D.	Shorncliffe	23/12/15	Pt II. 2
8/9/16	O.C. M.T.	Attached from C.A.S.C.	8.9.16	Orpington	Pt II DO 178
27 FEB 1918	16 C.G.H.	GRANTED GOOD CONDUCT BADGE	Orpington	9-6-17	Pt. II DO 50
18.2.19	do	leaves to be attached from C.A.S.C. London Area	do	19.2.19	Pt II DO 43
			W. Cullen		
19.2.19	L.A.S.C. London	"Off Command" from No 16 C.G.H. Orpington	London	18.2.19	Part 2 DO. No. 43

(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) Signaller, Shoeing Smith, &c.

[P.T.O.

(938). Wt. 15012/5156. 1,000,000. 1/16. P. P. Ltd. Forms/B.103/3.

R—122.

Rank | Name BELBECK, Orville Leslie | Reg'l No. 400085

Unit No. 1 F.A. | If in perm. Corps, What Unit? | Married or Single Single.

Place and Date of Enlistment Vernon, B.C. 9th June, 1915. Place of Birth Kenora, Ont.

Name and Address, Next-of-Kin Mrs. T. R. Belbeck. 1124, Dallas Road, Victoria, B.C.

Relationship Mother.

Assigned Pay Monthly $ | Payable to

Relationship

Separation Allowance $ | Payable to

Relationship

X 218

Discharge, Date and Place | Reason | Character

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
		C.A.S.C. Arrived in England.		5-9-15.	S.S. Scandinavian
30-10-15	Cas List 61	Adm Sent Hospital	Shorncliffe	12.10.15	Gonorrhoea.
11.11.15		Discharged to duty.	do.	29.10.15.	C.L. 70. (Came. I.S.).
12.11.15	Came. I.S.	Struck off Strength Transfer to A.S.M.S. Ambstff	do	1.11.15	P.A. II 84. Pro. 1041
11.11.15	A.D.M.S.	From 6 AM 10 to 6 AM 10 motor Sqt	"	11.11.15	P.II 20.
"	D.M.S.	do do	"	"	Corps Orders 1445-1000
30.12.15.	A.D.M.S. S-S.	From A.D.M.S. S-S. to C.A.S.C. I.D.	"	23.12.15.	P.II. O. 44.
29.1.16	C.L. 139	Adm Moore Bks Cpl.	"	20.1.16	Inflamation R. Knee
12.2.16	C.L. Cas to	Adm Cam Cons Cpl.	Mr. Horton.	11.2.16.	Sprained Knee Cas List 150
10.10.15	Came. I.S.	Granted 3rd Class Working Pay	Shorncliffe	11-10-15	P.II 20 # 42

400085 Belbeck Orville Leslie

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				
2.1.16	CASC TD	Taken on CASC TD	Shorncliffe	23.12.16	Pt II Do 2
28.7.16	CL Case	Trans to Mil Hosp.		19.7.16	CL 286. Malformations
14.7.16	CL Case TD	Adm Moore Bks Hosp		6.7.16	CL 276 also Pt II 188
23.7.16	Case TD	" Military Hosp		20.7.16	Pt II 205
23.7.16	Case TD	Reports from Hospital	Shorncliffe	20.7.16	Pt II 205, Ven.
28.7.16	CL Case TD	Disc. Military Hosp.		20.7.16	CL 285,
28.7.16	"	Adm Military Hosp.	S.Cliffe.	21.7.16	CL 285. For Examination also Pt II DO 215 of 2.8.16
5.8.16.	"	Disc Military Hosp		1.8.16	CL 293. Malformation R Foot
8.9.16.	Ont. Mil. H.	Attached to this unit for ad., pay, rations, discipline & Quarters from	Orpington	8.9.16.	Pt II DO. 177 Case London Area No 52
7-4-17	CASC	SOS to CASC London Area	S.Cliffe	8-9-16	also CASC TD Pt II 343 of 5.12.16
18.11.16.	"	Admitted, S.Cliffe Mil. Hos.	S.Cliffe	18.11.16.	237 CL 191
6.1.17	CAMC	Dis. " " "	"	20.12.16	CL 223 V.D.S. Pt II 5
20.12.16	CASC TD	Reports from Hos.	"	20.12.16	Pt II DO. 356
13.4.17.	Ont. Mil. H.	Admitted Hos.	Orpington	13.4.17.	88 & CL 303. CAMC. Mental in England
1.5.17.	—	Desert Hosp	—	1.5.17	Pt II O-103. Facial Spasms & CL 311 of 5.5.17 CAMC. Unfit-Eg
7-4-17	CASC	TOS from CASC TD	London Area	8-9-16	Pt II O 52
27.2.18	16th G.H.	Awarded G.S. Badge.	Pte	9.6.17	" 50.
19.2.19	CASC	On reporting with Case to be Pte	London	18.2.19	Pt O. 43.
		on Con to 16 C&H Orpington			
3-9-19.	CASC.	W.O.A.S. Drunk in Piccadilly London. 1st Charge. Admonished.	London	13-8-19.	DO. 202.

Form No. R 138
8014—10m—22/2/17.

Unit .....

TRANSFERS.

Month of .....

Number	Regimental Number	Rank	NAME	Transferred To	Receipt for Documents	Authority Pt. II. D.O.	Class
			Temporary Record Sheet C.A.B.C.				
	400085		Pte Belbeck L.				
31-10-18.			H C R X Sp Hsp Attd. from #16 C.G. Hosp.	Bushey Pk.	26/10/18	Pt II D.O. 52.	
16-11-18			#16 C.G. Hosp. ceases to comm to H C R x Hsp.	Bushey Pk.	15-11-18	Pt II D.O. 273.	
23-11-18			H.C.R. & S. Hosp. ceases att. on return to 16 C.G. Hosp.	Bushey Pk	16-11-18	D.O. 55.	
19/2/19			16 C.G. Hosp ceases to be attd	Orpington	18/2/19	— 43.	

R. 140.

Section ..... *R 2.*

RETURN OF DOCUMENTS.

Group ..... *Division* ..... *Week ending* .....

	Unit.	No. of Attestations Deficient.	Part II. Orders Received up to	Part II. Orders Completed up to		No. of Uncompleted Discharges.		Nominal Rolls of Unit Received up to	Nominal Rolls of Unit Checked up to	Documents Transferred.		Outstanding Queries.	Documents sent to Pensions and Claims Board Outstanding.	
				Last Week.	Current Week.	Current Week.	To Date.			From	To		Current Week.	To Date.

Form R 122.
10287—65M—28-7-17.

FIRST SHEET FILED IN ENVELOPE.

Rank | Name BELBECK, Orville Leslie | Reg'l No. 400085

Unit No 1 F.A. | If in perm. Corps, What Unit? | Married or Single Single

Place and Date of Enlistment Vernon, B.C. -9th June-1915- | Place of Birth Kenora, Ont.

Name and Address, Next-of-Kin Mrs. T.R. BELBECK

1124 Dallas Road, VICTORIA, B.C. | Relationship mother

Assigned Pay Monthly $ | Payable to

Relationship

Separation Allowance $ | Payable to | X218

O/S · CASC-LAO. | Relationship | 13906

Discharge, Date and Place | Reason | Character HRC

SECOND SHEET OF RECORDS.

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
Permanent Grade.		PRIVATE	Acting Rank.	NIL	
C.A.S.C.					
11.11.19	CASC.	S.O.S. to 2nd C.D.D.	Pte London	18.11.19	D.O. 261
19.11.19	2.C.D.D.	T.O.S.	" "	18.11.19	- 27
1-12.19	"	S.O.S. to Canada	" "	29-11-19	- 37
		131- T- 16		29-11-19	

400085 BELBECK Orville Leslie

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place[1]	Date.	REMARKS Taken from Official Documents.	
Date.	From whom received.					

Rank | Name BELBECK, Orville Leslie | Reg'l No. 400085

Unit No. 1 F.A. | If in perm. Corps, What Unit? | Married or Single Single.

Place and Date of Enlistment Vernon, B.C. 9th June, 1915. Place of Birth Kenora, Ont.

Name and Address, Next-of-Kin Mrs. T. R. Belbeck. 1124, Dallas Road, Victoria, B.C.

Relationship Mother.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

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	Balance	Remarks, Casualties, etc.
1915 Sept 1	Oct 31	61.	1.00	61.	61.	.10	6.10	10.50	87.60			53.53			53.53	34.07	10.50 equal 21 Days m/Pay @ 50¢ per day
Nov 1.	Nov 30	30	1.00	30	30.	.10	3	34.57	67.07			19.47			19.47	47.60	
Dec 1	Dec 31	31	1.00	31.	31.	.10	3.10	47.60	81.70			75.42			75.42	6.28	
1916 Jan 1.	Jan 31	31.	✓	31.	31.	✓	3.10	6.28	40.38							40.38	
Feb 1		29		29	29		2.90		72.28			4.87			4.87	67.41	
Mar 1		31		31	31		3.10		101.51			4.87			4.87	96.64	
				213.00			21.30	20.50	254.80			158.16			158.16	96.64	

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

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
Belbeck.	O. L.	400085.

Rank	Unit	Co.	Troop	Batty.
Pte.	C.A.M.C. C.A.S.C. (D.) Camb. in Eng			

Hospital — Date of Admission

Transferred Tent Hosp. St Martin's Plain Shorncliffe Hosp. 12-10-15.

Moore Barracks Hosp. 20-1-16

Can Cons Monks Horton Hosp. 4-2-16

Moore Barracks Hosp. 6.7.16

Diagnosis Gonorrhoea.

(1) Inflamation R/ Knee

Later Diagnosis (if changed)

(2) Malformation of Rt Foe

(3) V.D.S.

Additional Diagnoses: if more than one state present Facial Spasm

Rw.

A & D. Book. S.H.

DISPOSITION

C.h. 30-10-15 #61.

" 29-1-16 - 139

" 12-2-16 150

Ch. 14.7.16 #276

" 28.7.16 286.

5.8.16 293

24.11.16 #191

6.1.17. 223.

24-4-17 303

5-5-17 311

To Unit - 29-10-15.

	Date
Dis	13.7.16
Dis	20.7.16
"	1.8.16
"	20.12.16.
Dis	1-5-17

REMARKS

Dr

P.T.O.

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	To Shorncliffe Mili.	19.7.16.
2.	(re-ad) " "	21.7.16
3.	Ant. Mil Orpington	20.11.16 14-4-17
4		
5.		
6.		
7.		

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
MEH	649-B-38435		

Number 140085 Rank Pte

Surname BELBECK

Christian Name Orville Leslie

Unit L.A.S.C. Theatre of War England

Date of Service 5-9-15

Remarks

Latest Address 2317 Trinity St.
Vancouver B.C.

Roll No. a Page 380

NAME

REGT. No.

RANK AND UNIT

NEXT OF KIN

CABLE	
No.	DATE

NATURE OF CASUALTY

M. F. W. 42—100M.—8-18.
H.Q. 1772 39-893

11 CARD NO.

SURNAME. Belbeck,

CHRISTIAN NAMES Orville, Leslie

FOLL. 20-12-19

Sos Dis Drunk

D0345 of 13-12-19

C.S. of Halifax

REGL. No. 400085, RANK Pte.

UNIT "B." Sect. No. I Fld. Amb. Depot. (2nd. R.A.)

FORMER CORPS Nil.

NEXT OF KIN.

NAMES IN FULL Belbeck, Mrs. T. R.

RELATIONSHIP TO SOLDIER (Mother)

ADDRESS 1124 Dallas, Rd.,
Victoria, B.C.,

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Kenora, Ont., DATE

PLACE OF ATTESTATION Vernon, B.C., DATE June 9th 1915.

O/S-27-8-15. 209

RTC 10-12-19 445 Pte

L. L. 94504. M. & D. 6512.

M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
61.	Tent. St. Martin's Plains	12-10-15	Gonorrhoea.
70	Tent St. Martins Plains Shorne. Mil. To duty	29-10-15	Gonorrhoea.
139.	Moore Barr. Can, Shorne.	20-1-16	Inflammation R. Knee.
150.	Can. Convl. Monks Horton	4-2-16	Sprained knee
276	Moore Bks. Can, Shorne.	6-7-16	Malformation of R. Toe.
286	Mil., Shorne.	19-7-16	Malformation Toe
286	Discharged	20-7-16	" " "
286	Re-Admitted	21-7-16	For examination (C.A.S.C. Tr. Depot)
293	Mil, Shorne. Disch.	1-8-16.	Malformation of Toe R.
191.	Mil " "	20.11-16	V.D. S
223	Discharged	20 [illegible] 12-16	" " "
303	Mil. Mil Orpington Kent	14-4-17	Ophthal. Hosp. Facial Spasm.

H. Q. FILE No. 649-

NAME Belbeck. O. L.

REGT'L. No. 400085.

RANK AND CORPS Pte. C. A. In. C. D. Depot #1 C. F. Amb.

CABLE	
No.	DATE

NATURE OF CASUALTY

NO. 1048.

FOLL.

L. L. Job 83225—M. & D. 5842.

M. F. W. 42—50m 7-15.
H. Q. 1772—39-893.

REGT'L. No. 400085

NAME Belbeck O.

H. Q. FILE No. 649

RANK AND CORPS Pte. Can Mg Unit

FOLLOWS

NO.

FOLLOWS

CABLE	
NO.	DATE

NATURE OF CASUALTY

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
311	Ontario Mil Hospital Kingston Ward	1-5-17	Ont. Mil Hosp. Facial Spasm

R. 149.

Name BELBECK Orville Leslie *Rank* Pte. *Reg. No.* 400085

Unit ~~C.A.S.C. TRAINING DEPOT (No. 1F.A.)~~

Next of Kin Canada. C.A.M.C.Ont.Mil.Hosp.Orpington.

1916		Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
July	6	Moore Bks.C.H.S'cliffe		Malformation of Toe R.	276	ER.	
"	19	Military Hosp.S'cliffe.		do	286		
"	20	Discharged:-		do	286	ER	
"	21	~~Moore~~ Re.Adm.M.H.S.Cliffe		For.Exam.	286	ER	
Aug.	1	Discharged		do (Q)	293	ER	
		C.A.M.C.					
Nov.	20	.Mil.Hosp.Shorncliffe.		V.D.S.	191.	ER	
Dec.	20	.Discharged ex.Can.Hosp.Etchinghill.		V.D.S.	223.	ER	
14-4		Ont.M il					

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
14-4	Ont.Mil.Hosp	.Orpington	Facial Spasm		304	
1-5	Discharged:-	Do,	Do.		311	

Form—R. 190 8528-25M-25/10/16.

IMPORTANT.

DISPOSAL OF ORIGINAL MEDICAL HISTORY SHEETS.

1. Action by Officer i/c Hospital—

(*a*) See that all entries are properly and fully made, and signed.

(*b*) Forward to Hospital to which man is transferred, immediately it is done. If discharged to Unit—to Officer Commanding such Unit.

2. Action by Officer Commanding Unit—

(*a*) On admission of man to Hospital, forward M.H.S. to such Hospital at once.

(*b*) On transfer to another Unit—to Officer Commanding such Unit.

(*c*) On proceeding Overseas — return to Record Office, London, without delay.

(Authority, Army Council Instruction 831, April, 1916.)

R. 149.

Name BELBECK *Rank* Pte. *Reg. No.* 400085.
Orville Leslie

Unit C.A.S.C. Training Depot(No.1 F.A.)

Next of Kin

Date		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List
		TRANSFERRED TO ONTARIO MIL.HOSP.ORPINGTON.						

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

Name Belbeck O.L. *Rank* Pte. *Reg. No.* 400085

Unit C.A.M.C.TRAINING DEPOT.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/KO	W.O. List
	TRANSFERRED TO C.A.S.C.TRAINING DEPOT.					

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

Date of Enlistment 11. 5. 15.

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

B 20512

Date of Assignment 1 Nov. 1918.

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15.00			

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion C. A. M. C. 4th Fld. Amb.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1 BANK OF MONTREAL, MAIN OFFICE,
MONTREAL,
QUE.
% 400085 PTE O.L.BELBECK
FIFTEEN DOLLARS

2 15 15.00

3

4

71238-0-4 REMARKS N. Roll 502

Date	Cheque No.	Amount S/A	Amount A/P	Total	
Nov.	Y 57544		15	15	c
DEC	B 68993		15	15	c
JAN	D 71065		15	15	c
FEB	D 79115		15	15	c
MAR	D 90052		15	15	c
APR	E 1563		15	15	c
MAY	B 6554		15	15	c
JUN	B 9833		15	15	c
JUL	B 11261		15	15	
AUG	B 13318		15	15	
Sept	a 14062		15	15	
Oct	B 13829		15	15	
			180	180	

A/c closed 31/10/19 auth for 2m on file not meaning MRO 125378 rend 4/11/19 AMD.

M. F. W. 128.
40M. 6-7—1772-39-1141
L. L. 22330—M. & D. 1993.

MDH.

A/c Closed
Ret'd per Cassandra
Date 10.12.19 F.X. 16.12.19
Clerk

AUDITED.

AUTHORITY FOR NEW ACC'T. 2m. 23.9.18 M Hollerand 18.11.18

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

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

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.—6-17—1772-39-1141
L. L. 22320—M. & D. 7993.

Interest on Deferred Pay.....

.....

.....

"VICTORY" WAR LOAN

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

No. of Dependents Nil ~~War Service Badge Class "A"~~ No.

EMB CASSANDRA GLASGOW 29.11.19

SHORT FORM.

PROCEEDINGS ON DISCHARGE. Dispersal Area T.

Religion Prot. (Demobilization.) Next of Kin Mother

1. No. 400085
2. Rank Pte.
3. Name Bellbeck Orville Leslie
4. Unit Cash.
5. Date of Discharge | Place
6. Reason for Discharge Demobilization

HALIFAX DEPOT DEC 20 1919 CLEARING SERVICES COMMAND

Trade Chauffeur Category B.

Service in France Nil Occupational Group 13

7. Authority Routine Order 1420
8. Proposed Residence after Discharge 2517 Trinity St. Vancouver B.C.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate M. F. W. ? 3 9

O. L. Bellbeck

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

MEDICAL DOCUMENTS FORWARDED TO ~~S. C. R.~~ OR B. P. C. 22 DEC 1919

Place

Date

HALIFAX DEPOT DEC 20 1919 CLEARING SERVICES COMMAND

Major

O. C., HALIFAX DEPOT CLEARING SERVICES COMMAND

Signature

(O.C. Discharging Unit.)

M.F.B. 218a—150M-3-19—1772-39-113.

CASSANDRA 12. 12. 19

AUDITOR | PAYMASTER

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

M. OR S.

REGT. No. 400085 RANK PTE. NAME (IN FULL) BELBECK O. I. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No. | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Long L.P. to adj to. 30. 11. 19		

ORIGINAL UNIT C.E.F. | IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ 15.00 | DATE EFFECTIVE 1. 11. 19 closed

PAYABLE TO Bank of Montreal | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS Bank of Montreal Vancouver B.C.

ADDRESS Damos & c. Main Office Montreal Que.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED PLACE Halifax | DATE 20. 12. 19 | REASON | AUTHORITY | IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	PAY AND F.A. RATE	PAY AND F.A. AMOUNT $	PAY AND F.A. AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.			TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	BALANCE CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT 30. 11. 19		1.85																					Nov. Dec.						149	38	149	38					
											Boat. Train chg 249.33						14	84	5	00	40	00	30	00							109	84	159	25			35.00 of credits = to clothing allowance
19. 12. 19	19	1.85	35	15	35	00			70	15																							89	10			
28. 12. 19	1	1.85	1	85						1 85																							84	25			20.00 of credits = A.P. Nov & Dec. chgd not paid
					30	00			30	00																							54	25			
							D.Bal		54	25																											
Lieut., Demobilization Pay M.D. No. 11									159	25																					159	25					
																																	54	25	54	25		D.Bal
R.M. 183 days		420							420	00																	57	25			57	25	362	75			
											Jan 15	159629					5		82	75							82	75			82	75	280	00			
											Feb 10	161034							70								70				70		210	00			
											Mar 13	161204							210								210										
									420	00																	420	00									

Certified that all payments have been made on this account for which covering authority has been received to date.

Paymaster, Demobilization Pay

War Service Gratuity

Service 3 years ..... months

I certify that all payments of War Service Gratuity have been made on this account according to the Period of Service shown on the M.F.W. 2596 received.

Officer Commanding Sorting Centre, Capt. M.D. No. 11

420.00

200M-3-19.—L. ... 58785-11. & D. 9985.
M. F. W. 2596.
1772-39-1390.

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

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

23444

400085 Pte Belbeck L.O.

3572 T3

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.

MEDICAL HISTORY of

Surname Belbeck *Christian Name* Leslie

TABLE I.—GENERAL TABLE.

Birthplace ... Parish _____ County _____

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

Declared Age ... ... 20 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 Victoria
on _____ day of _____ 191 .

Joined on Enlistment ... Transferred to ... ...

Corps.	Regtl. No.
C.A.S.C. T.D.	400085

Became non-effective by _____

on _____ day of _____ 191 .
(*Signature*) _____
(*Rank*) _____

(B 99129.) W. 15297/M127. 500M. 1/16, J P. & Co., LTD. Forms B. 178 39

P.T.O.

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				
Moore Barracks Hpl. Shorncliffe.	5	7	16	17	7	16	Malformation of Toe 4th Right.	13	Amputation 4th Right toe and extension tendon lengthened Cured Discharged to Coy.	F A Macdonald Major
MILITARY HOSPITAL, SHORNCLIFFE. C	21	7	16	1	8	16	Gonorrhoea	11	Discharged to Unit	B.P. Hughes Capt RAMC
CANADIAN HOSPITAL, ETCHINGHILL, LYMINGE.	19	11	16	20	12	16	Syphilis	32	Discharged to duty (Clear Patient)	A M Fearn Capt Can.

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
ORPINGTON - 8 MAY 1917	B III Alex MacKay Maj RAMC President, Medical Board.

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.

MEDICAL HISTORY of

Surname Belbeck. *Christian Name* D L.

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 ... _____

16 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 ...	C.A.S.C.	400085.
Transferred to		

Became non-effective by _____

on _____ day of _____ 191

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

(5506.) W. 14271/M. 89. 750M. 1/16. C. P., Ltd. Forms B. 178 39

P.T.O.

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				
ONTARIO MILITARY HOSPITAL ORPINGTON, KENT.	13	4	17	1	5	17	Facial Spasm	19	Deafness left ear; acting left eye; BP. 125-78	
									Heart, lungs, liver & kidneys normal. Improved	Harley Smith Maj.

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.

The Board concurs except it is considered V.D.S. should be entered as a disability, origin nov. 1916 England. Q 11 a - no, b - n.a. 12 yes - misconduct. 13 - twelve months 14. - Course at Etchinghill 1916. Two courses at Orpington. He states last wassermann neg. about 7 mos ago. Q 15 suggested that he be dealt with on arrival in Canada in accordance with P.C. 9 47 of 20-1-19.

19. Is the invalid fit for — Attd Ear Report.

(a) General service,	(Category A)	(~~Yes or No.~~)
(b) Service abroad, not general service,	(" B)	(~~Yes or No.~~) "B"
(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.)
Board for return to Canada. Ord. Orderly 9355 of 11-11-18

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 13 Burnes St. — Harold Buck, President.
Date 30 — VII — 19 — major cams — Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

Witness ..... Signed .....

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

President.

Place .....
Date .....
Members

APPROVED BY — Jno F Seaborn — Assistant Director of Medical Services.
Date .....
Captain, C.A.M.C.
for A.D.M.S., Canadians, London Area.

APPROVED BY — Director-General of Medical Services.
Date .....

ASSISTANT DIRECTOR OF MEDICAL SERVICES CANADIANS, LONDON AREA
13, BERNERS ST, LONDON, W.1

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 3 Southampton St. Date July. 27.

1. 1 (a) Unit C.A.S.C. (b) Regimental No. 400085 (c) Rank Pte
(d) Surname BETBECK (e) Christian name LESLIE OTVILLE
(f) Home address 1124 DALLAS Rd. VICTORIA. B.C.
(g) Next of Kin MRS A R. BETBECK (h) Relationship MOTHER
(i) Address of Next of Kin Ses. 7
2. Age last birthday 23 Date of birth MARCH. 27. 1894.
3. Enlistment, or Appointment (if an Officer) (a) Place VICTORIA. BC (b) Date MAY 11. 1915
4. Personal description:
(a) Height 5 — 9½ (b) Weight 145 (stripped) (c) Complexion MEDIUM.
(d) Colour of hair BROWN (e) Colour of eyes GREY (f) Identification marks, Scars, etc. VACCINATION: LEFT ARM.
5. Former trade or occupation CHAFFEUR.
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
	4	208

MAN'S STATEMENT

	Periods From	Periods To
Canada	MAY 11 - 1915	JUNE 15 - 1915
England	JUNE 15 - 1915	→
France or other theatres of War		

7. Original disease, or injury DEAFNESS L. EAR.
(a) Date of origin 10 - 4 - 17. (b) Place of origin ORPINGTON.
(c) Cause EXPOSURE (see space upon).

M. F. B. 227.
400M.—11-18.
1772-39-117.

10-12-19

CLEARING DEPOT HALIFAX.
CONDITION UNCHANGED.
E Shaffner M.O.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (*a*) Weakness—slight, mod. e, 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.)

DEAFNESS. L. EAR. (: partial loss of function of left ear.)

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.)

OBJECTIVE - SEE SPEC. REPORT.

SUBJECTIVE - Complains of deafness in left ear.

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

Nervous System No. Cardio-Vascular System No. (If pulse rate is abnormal, B. P. will be taken.) Genito-Urinary System No. (Albumen and Sugar will be excluded.)

Special Senses SEE 9. Respiratory System No. Integumentary System No.

Disturbances of Mentality No. Digestive System No. Muscular System No.

Osseous and Joint Systems No. Any other general condition No.

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

Sudden onset left facial paralysis of left facial nerve which was quite transitory persisting only fourteen days then gradually disappearing until it completely disappeared. One week after onset of paralysis he became deaf in left ear which has persisted ever since without any improvement. To 16 Can Gen Hosp. 19 days

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*).)

Malformation of 5th Rt Toe. Tendon lengthened Moore Barracks 13 days. 1916
Gonorrhoea. Military Hospital Shorncliffe. 11 days 1916
Syphilis. Etchinghill 32 days. 1916.

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

Deformity of 5th toe Rt foot.

11.—(*a*) Did the disabling condition have its origin before enlistment? NO

(*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.)

na.

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? na.

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.)

Hospital treatment.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? No.
(If the answer is "yes" state nature of treatment required and probable duration)

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

17. Recommendations.

F E McKenty Capt Cam C
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 Orville Leslie Belcher 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

AB.

Orville Leslie Belcher Rank.
Signature of invalid examined.

Station	Date	Symptoms and progress (Date of admission to hospital, and date of discharge from hospital, to be entered in red ink.)	Weight clothed, without boots—lbs.	Urine: Normal (N.) Albumen (Alb.)	Wassermann Reaction: Method (Original (O.) / Modification (M.))	Wassermann Reaction: Result (Positive (+) / Negative (—))	Treatment: Arsenical: Intravenous Injection. Dose in grammes: Salvarsan	Treatment: Arsenical: Intravenous Injection. Dose in grammes: Neo-Salvarsan	Treatment: Mercurial: Intramuscular injection. Dose of Metallic Mercury in grains	Treatment: Mercurial: Inunctions or Oral (Preparation and dose)	Treatment: Other Methods	Signature of M.O. (Each M.O. will sign his name in full on the first occasion; subsequent entries may be initialled)

Army Form I. 1238.

SYPHILIS CASE-SHEET.

Regtl. No. 400085 Rank and Name Pte Bellbick, D. Corps C.A.S.C.

Placed on Syphilis Register at CANADIAN HOSPITAL, ETCHINGHILL, LYMINGE. on 19/11/16 No. in Register

Disease contracted at London . Primary sore appeared on (date)

CONDITION WHEN PLACED ON REGISTER.

Primary sore—character and site sore on glans of penis

Lymphatic glands all glands + and hard

Skin (nature and distribution of rash) general macular eruption

Mucous membranes throat congested

Other symptoms

Examination of exudate from sore—Spirochaeta Pallida (present or absent)

Examination of blood serum—Wassermann reaction { Method employed (original or modification) / Result (positive or negative) }

Station CANADIAN HOSPITAL, ETCHINGHILL, LYMINGE. Date 19-11-16 Signature of M.O. [illegible]

Struck off Syphilis Register at on

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

Station Date Signature of M.O.

(9 38 38) W 1624—1106 100,000 5/15 H W V(R) Forms I. 1238 8

N.B.—On completion of a course of treatment a red line to be drawn across the page, and the date when the next blood test is due to be entered in red ink below the line, *e.g.*, "Blood test due 15.5.14."
The date and result of the blood test to be entered; and if negative, the date on which the next blood test is due to be also entered.

Station	Date	Symptoms and progress (Date of admission to hospital, and date of discharge from hospital, to be entered in red ink.)	Weight clothed, without boots—lbs.	Urine	Wassermann Reaction		Treatment					Signature of M.O. (Each M.O. will sign his name in full on the first occasion; subsequent entries may be initialled)
							Arsenical		Mercurial		Other Methods	
				Normal (N.) Albumen (Alb.)	Method {Original (O.) Modification (M.)	Result {Positive (+) Negative (—)	Intravenous Injection. Dose in grammes		Intramuscular injection. Dose of Metallic Mercury in grains.	Inunctions or Oral (Preparation and dose)		
							Salvarsan	Neo-Salvarsan				
CANADIAN HOSPITAL, ETCHINGHILL, LYMINGE.		19/11/16										
	20/11/16						.3					J.M.C.B.
	21/11/16								1/.			J.M.C.B.
	24/11/16						.3					J.M.C.B.
	25/11/16						.3					J.M.C.B.
	28/11/16								1/.			J.M.C.B.
	9/12/16								1/.			J.M.C.B.
	11/12/16						.4					J.M.C.B.
	14/12/16								1/.			J.M.C.B.
	18/12/16						.5					J.M.C.B.
	8/1/17						.5		1/.			J.M.C.B.
	9/1/17						.5		1/.			J.M.C.B.

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY	* ~~ENGLAND~~ or CANADA.
EFFECTIVE DATE:- 1st/18.	
AMOUNT:- 15.00	

SEPARATION ALLOWANCE.	* ENGLAND or CANADA.
EFFECTIVE DATE:-	
AMOUNT:-	

NAME:- BELBECK. O.L.

NUMBER:- 400085.

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.

"Savings A/c" Main Office
Bank of Montreal, Montreal Que.

Stopped Eff 1/12/19

S.O.S. Canada 29/11/19. D.O. 37 2 CDD 1/12/19

Mail C.P.R.P.B. 6/3/19

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte.

UNIT AND TRANSFERS

ORIGINAL UNIT:- G.A.M.G.S.S.

DATE ACCOUNT FIRST OPENED:- 9/6/15.

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
DO 43.	18/7/19		S.O.S. Lan. & D.O.C.

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
11/11		Repayment Q4005 8/9	~~2 13~~			Ledg. Bal.	16 01
18/11		London	~~38 93~~			L.T.C. Dr. Bal	~~54 38~~
25/11		—	24 33				49 38
			65 39				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	~~P.F.~~ W.T.	SUBS'CE ALL'CE
DO 43 eff 5/4/19 Subs.	1 -	10	50	1 50
DO 117 eff 6/7/19 & Rwt	1 00	10	75	1 50

PARTICULARS OF RENDERING NON-EFFECTIVE:- Trans. to Canada 30/11/19 NR 13461 Ldn 26/11/19

MONTH 1919	PARTICULARS	CR. 1	CR. 2.	PARTICULARS		DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED 57000	SEPARATION
	forward	135 00		forward			45 00		15	664 38		
				CR. 59706	5/4/19	24 33	—			640 05		
				CR. 60726	9/4/19	24 33	—			615 72		
				CR. 65794	25/4/19	38 93	—			576 79		
May	R.A.	80 60								657 39		
	3rd G.W.P.	15 50								672 89		
				Ch. CR. 55666	26/3/19	34 07	—			638 82		
				CP. 67295 Rwt	6/5/19	73	—			565 82	495 -	
				CP. 68970	14/5/19	24 33	—			541 49		
	w/o W.P. & A. 1/4/19-31/5/19: 151 days	37 75								579 24		
				CR. 71940	29/5	34 07	—			545 17		
				C.A.P.					15	530 17		
		266 85				253 06	45 -		30 -			
June	R.A.	78 -								608 17		
	W.P.	22 50								630 67		
				C.A.P.					15	615 67		
				CP. 75593	20/6	97 33				518 34		
				CP. 76438 Rwt	25/6	97 33				421 01	398	
July	R.A. & 2/6	80 60		C.A.P. July					15	486 61		
	W.P.	15 50								502 11		
				Q4005 2174		4 10				498 01		
				CR 14148.	11-6-19	42 80				454 21		
				CP. 72597	31/5	48 67				405 54		
		196 60				291 23			30			
	w/o W.P. @ 25 per July	7 75								413 29		
				CP 78914 Rwt	9/7	97 33				315 96	295	
				CP. 81071 Rwt	24/7	97 33				218 63		
				CP 80757 Rwt	17/7	97 33				121 30	Nil	
	fwd	7 75			fwd	291 99						

NUMBER 400085 RANK Pte NAME BELBECK O.L.

MONTH 1919	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS		DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	Ford	7 75		Ford		291 99				121 30		
		775				291 99						
Aug	Pd.	80 60								201 90		
	wp	23 25								225 15		
				G.A. Aug					15	210 15		
				GP. 83555	11.8	48 67				161 48		
				GR. 93869	13.8.	48 67				112 81		
		103 85				97 34			15			
				GP 85017	23.8	48 67				64 14		
		103 85				146 01			15			
Sep	Pra 2.6	78								142 14		
	W.P.	22 50								164 64		
				GR 85453.	27.8.19	48 67				115 97		
				G.A.P. Sep					15	100 97		
		100 50				148 67			15			
				QH005. # rbr Sao.	18.8.	4 10.				96 87		
				GP. 87004.	13.9.	48 67				48 20		
				GR. 86701	10.9.	48 67				— 47 Dr		
				GR 87610.	22.9.	24 33				24 80 Dr		
				GR. 88180.	29.9.	48 67				73 47 Dr		
						174 44						
Oct.	P.a	80 60		G.P 01089	14/10	24 33						
	W.P.	23 25		02252	29/10	38 93				32 88		
				G.P. 00775.	9/10	29 20						
				" 01910	25/10	9 73				71 81		
				" 2922	10/11.	48 67				120 48		
					27/10	150 86						
				G.A.P. 15/11	Oct.				15			
Nov	Pra. rat.	55 50										
	Sub. all. 1-29	43 50										
	Indian Dep Pay	52 49		No pay end of Nov.	Nov					16 01		
				G.P. 3594	18/11.	38 93						
				" 3882	24/11.	24 33						
				Q4005. 3.	11/11.	2 13				Stopped 49 38		
		151 49				65 39			15			

Sus 13 29/11

49

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.	NAME:- BELBECK. O. Leslie.
EFFECTIVE DATE:- 1.11.18		EFFECTIVE DATE:-		NUMBER:- 400085
AMOUNT:- 15.00		AMOUNT:-		

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.

Savings Acct: Main Office
Bank of Montreal, Montreal, Que.

Stopped eff. 1-11-19.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private.

UNIT AND TRANSFERS

ORIGINAL UNIT:- Camb. 75.

DATE ACCOUNT FIRST OPENED:- 9/6/15

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
PM.2. 12/10/15	16/1/17.		OMH. Orpington
MR 1.11.18	1.11.18		CASC
MR. 1/4/19	1/4/19	15/4/19	LAO.
D.O. 43	18/3/19		LAO

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

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	.10	W.P. 50 cts	
D.O. 78. eff. 3/4/19 Subs.	1	10	50	1 50

PARTICULARS OF RENDERING NON-EFFECTIVE:- Dis: Canada 30/4/19. 13461. London 25/4/19.

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR. 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mch 31	Bal Forward								544 36	524 25	
April	P.E. P.	33							577 36		
	W.P from 1/1/18 to 30/4/18			Q4005 - 95 CASC 15/3/17 (a9)	5 58				571 78		
	120 days @ 50	60 -							631 78		
		93 -			5 58						
May	P.E. Pay	34 10							665 88		
	W. Pay @ 50 cts	16 50							682 38		
	W.P. 1-7-17 to 31-12-17 - 184 days @ 50 Second Period 3.72.	92 00							774 38		
				DNAR 30 No 16 GH 12/4/18 a11	7 30				767 08		
				DNAR 170 — " — 29/4/18 a11	7 30				759 78		
				WR 222 — " — 3/5/18 a16	9 73				750 05		
				Rem 205 GPM 27/5/18 a19	100 00				650 05	638 50	
		42 60			124 33						
June	P.E. Pay	33 -							683 05		
	W. Pay 50 cts	15 -							698 05		
				W.P. overcredited May 1918		1			699 05		
				DNAR 299 16/5/18 16 GH a7	48 67				648 38		
				" 412 31/5/18 " a7	29 20				619 18		
				CASC 16 GH 11/6/18 a10	61				618 57		
				DNAR 554 14/6/18. 16 G.H. a11	14 60				603 97	~~638 00~~ 661	
		48			93 08	1					
July	P.P.	34 10							653 57		
	3rd class W.P.	15 50							658 97		
				DNAR 629 28/6/18. 16 GH a8	14 60				624 37	676 75	
				757 16/7/18 " a14	14 60						
		49 60			29 20						
	Forward										

NUMBER 400085 RANK PC NAME BELBECK. O. Leslie

Month	Particulars	Cr. 1.	Cr. 2.	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4.	Balance	Deferred	Separation
	Daily Bal								62437	68 3/8 75	
Aug	P.P.	34 10									
	3rd Class W.P.	15 50							67397		
				AR 901 30/7 165H @5	9 73				66424		
				1028 15/8 " @12	9 73				65451		
				1180 30/8 " @13	9 73				64478	706	
		49 60			29 19						
Sep	PP	33							69278		
	3rd class W P	15							69278		
				AR 16 Nov 1915 Carne TS @11	3407				65871		
				3 do do @11	1946				63925		
				1340 13/9/18 165H @16	9 73				62952		
				1385 27/9 " @17	9 73				61979	78 50	
		48			72 99						
Oct	PP	34 10									
	3rd class Working Pay	15 50							66939		
				AR 1531 15/10 165H @35	7 30				66209		
				1602 29/10 " 55	9 73				65236	75 75	
		49 60			17 03						
Nov.	PP. 33 + 3rd c. w.p. 15	48		C.A.P.				15	66536		
				AR 684. 13/11/18 Bushy Park 10	9 73				67563		
				AR 1849. 16/11/18. 165H. 13	9 73				66590		
				AR. 1873 29.11.18. 165H. 40	9 73				65617		
				D.N. 1476 DoR 9/11/4/108 8/4/16 55	4 57				65160		
				AR. 2033 20/12/18 ✓ 66	14 60				63700		
Dec	P.P. & 3rd c.w.p.	49 60		C.A.P.				15	67160	75 75	
Jan	P.P.	34 10		C.A.P.				15	69070		
	3 c.w.p.	15 50							70620	58 50	
		49 20			48 36			45			
Feb	P.P.	30 80		C.A.P.				15	72200		
	3 c.w.p.	14 00							73600	65 50	
				AR 2086 26/12/18 165H 7	9 73				72627		
				2255 14/1/19 Orp. 20	9 73				71654		
				Rem. 1074 & 14598 23/12/18 27	100 00 Wool.				61654	65 50	
				2367 30/1/19 ✓ 53	9 73				60681		
				2434 14/2 ✓ 83	4 87				60194		
Mar	P.P.	34 10		C.A.P.				15	62104		
	3 c.w.p.	15 50							63659	73 25	
				2511 19/2 Orp. 101	9 73				62686		
				41466 26/2 Sauc. 130	24 33				60253		
	3 c.w.p. 29/12/15 31/12/15 = 3 Days D.O. 66 19/3/19	1 50							60403		
				48811 12/3 ✓ 155	14 60				60398		
									58938		
		95 90			182 72			30			
	Subs. 3/4/19 - 30/4/19 = 28 @ 1.50	42							63138		
Apr	P & T.	78							70938		
	3rd W. P. @ .50	15							71438	670	
				c/o. Subs. 1/4/19 - 30/4/19 = 30 @ 1.50		45			67938		
				C.A.P.				15	66438		
	Forward	135		Forward		45		15	66438		

Married or Single: Single

Place of Birth: Kenora Ontario

Name and Address of Next of Kin: Mrs. J. R. Belbeck. 1124 Dallas Rd, Victoria B.C.

Relationship of Next of Kin: mother

Name and Address of Next of Kin:

Relationship of Next of Kin:

Separation Allowance Monthly $: Effective

Payable to:

Relationship of Dependant:

File No. Name Unit

Casualties, Promotions, &c.

Particulars	Effective Date	Authority

Admissions to Hospital, &c.

Date Admitted	Date Discharged	V. or A.	Name of Hospital
18/11/16	20/12/16	V.D.	Shorncliffe Hosp 80237 18/11/16

Reg'l No. 400085 Rank Pte Name Belbeck O. Leslie

If in Perm. Corps What Unit: Unit CAMC.T.S. Transferred to Orpington (attached) Date 16/1/17. Authority S.M.2 Ruling dated 14/9/16

Permanent Force Allowances: Transferred to: Date: Authority:

Place of Attestation: Vernon B.C. Transferred to: Date: Authority:

Date of Attestation: 9th June 1915 Transferred to: Date: Authority:

Assigned Pay Monthly $: Date Effective

Payable to: Relationship

Assigned Pay Monthly $: Date Effective

Payable to: Relationship

Stop-Payment Form (Assigned Pay) Rendered (Date): Effective: Reason:

Discharge Date and Place: Reason and Authority:

Account Transferred to Non-Effective Branch (Date):

Account Transferred to Officers' Pay Branch (Date):

Date 1916	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	C.J.	Remarks
			213				2130							2050	25H 80											158 16				158 16	96 64					
Apl 1-30	30	1.00	30		30	1.0	3								33					1180 CASCTD	14/4/16					4 87					129 64					
																				m 1083						4 87										
May 1-31	31.	✓	31.		31.	✓	3	10							34.10					m 987 CASCTD	1/3/16.					4.87				14 61.	149 13					
June 1/30	30	✓	30		30	✓	3								33																182 13					
July 1/31	31	✓	31		31	✓	3	10							34.10													36	36	215 87					36 blstg on repayment Vchr C844 Exp. C.T.D.
Aug 1/31.	31.	✓	31.		31	✓	3	10							34.10																249 97					
																CASCTD		1647	23/4/16							48 67										
																"		1262	17/5/16							4 87										
																"		1272	1/5/16							4 87										
																"		1294	15/5/16							9 73										
																"		1984	17/7/16							14 60										
																"		1006	5/9/16.							. 77										
—	—	—	—	—	—	—	—	—							— —											— —					— —					
Sept 1/30	30	1.00	30		30	✓	3								33															83 51.	199 46					
Oct 1/31.	31	✓	31		31	✓	3	10							34.10	CASCTD		2145	14/8/16							9 73										
																"		1528	5/7/16							7.30				17 03	216 53					
																Orpington		626	19/9/16							9 73										
																		938	24/9/16							4 87										
Nov 1/30	30	✓	30		30	✓	3								33	CASCTD		2320	28/10/16.							4 87				29 20	220 33					
																Orpington		973	30/10/16.							9 73										
Dec 1/31	31	✓	31		31	✓	3	10							34.10	Orpington		690	23/9/16							4 87				4.87	249 56		180	69 56		To Orpington Bff. 16/1/17
1917			48 80				48 80																													
Jan 1/15	15	1.00/70	16 50												16.50					1058	10/11/16	Court.					4 87					266 06					w/b PM2 Ruling dated 14/9/16
																				3448	30/11/16	Pathing Mill					1 21										14.50 Von Charges 18.11.16 16.20 12.16 = 88 days
																				1500	31/5/16	Cancelled.					7 30										
Feb 31. 1.17	16		17 60												17 60		15/1/17	1410		1118	15/11/16	Court.		9 73			4 87										C604 No. 5. 5/1/17
			570 90											2050	591 40									9 73	375 63			20 16	355 52	235 88						

400085. Pte Bellbeck O.R.

DATE	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
Bt Fwd.			570	90										20 50	591 40
28.2.17	28	1 00/10	30	80											30 80
31.3.17	31		34	10											34 10
Apr 1/30	30	1 00/10	33												33
May 1/31	31	1 00/10	34	10											34 10
June 1/30	30		33												33
July	31		34	10											34 10
Aug	31		34	10											34 10
Sept	30		33												33
			837	10										20 50	857 60

Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date
				Cases 3028	20/10/16		
1494	27/4/17	1551	24/5/17	446	15/7/16	Stating	
1461	16/4/17	1560	12/6/17	1441	24/1/17	Omit	
				3400	11/1/17	Cases	
50	30/4/17						
23	13/4/17						
105	29/5/17						
75	14/8/17						
158	29/6						
129	14/6						
206	20.7	306	30.8				
196	16.7	269	14.8				

Cash Payments 1	2	3	4	Assigned Pay	Other Charges	T D	Pay Withheld or Deferred	Pay Available for Issue	Remarks
	973	325	63		2076	355 52	235 88		
		4	87		05	4 92	261 76		.054 AA 51 #1814 21.12.16 Hosp on wages
973	973	1	22						
973	973	4	87						
		973				54 74	241 12		
							274 12		
974									
973						1947	288 75		
974									
973						1947	302 28		
							336 38		
974									
973						1947	351 01		
973	974								
973	973					38 93	345 08		
973	973	326	32		30 21	51 25			

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEBITS RED. PAY	SER. ALLCE ENG.
Oct	Sep. Bal Fwd	~~345 08~~							345 08	290	
"	P.P.	34 10							379 18		
		34 10		AR 233 30/9/17 6 Ad 6 Ld.	2 44				376 74		
Nov.	P/P. Nov	33			2 44						
		34 10							443 84		
1918	Dec	67 10		on AR 161 16/11 no 16 C.G.H.	973				934 94		
Jan.	3rd class W.P. 1/1/16 to 30/6/17. 54 days less 33 dy. V.D. 514 dy.	259		" 421 29/10 OMH Dropping	973				1946		
		34 10							715 48		
	P Pay	29 10			1946				30 80		
									746 28		
									116 80		
									629 48		
Feby	P Pay	30 80		" 542 21/12/17 16 C.G.H. Dropping	9733				629 48		
				on AR 512 17/12/17 6 G.H. "	1947				34 10		
		30 80			116 80				663 58		
									119 22		
									544 36		
Mch		34 10		on AR 496 30/11/17 16 C.G.H. (a) 7	973						
				on AR 597 24/1/18 " " @ 14	2433						
				on AR 392 15/10/17 G.S.H. " a 30	973						
				on AR 341 18/9/17 OMH a 30	973						
				on AR 364 28/9/17 " " a 30	730						
				on AR 661 30/1/18 " " a 31	1460						
				on AR 597 28/2/18 " a 39	973						
				" 786 18/2/18 a 39	1460						
				on AR 1026 22/3/18 " a 41	1947						
		3410			11922				54436	524 20 ~~510 00~~	

Date

Pay Withheld or Deferred

Pay Available for Issue

Remarks

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
19/6/15	O. K. J. R. Biggin.
17/6/15	" "
26/7/15	Positive. R.Gibson.
13/8/15	" "

Table IV.—Service Table.

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

I certify the foregoing to be a true copy of an original entry on a Medical History Sheet of this man.

for the Officer in Charge of Records
Canadian Contingent.

G.A.M.C.

DUPLICATE. DUPLICATE.

400085

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.

MEDICAL HISTORY of

Surname BELBECK *Christian Name* Orville Leslie.

Table I.—GENERAL TABLE.

Birthplace ... Parish Kenora, County Ont.

Examined ... ... on 11th day of May 191 5 at Esquimalt, B. C.

Declared Age ... ... 20 years days.

Trade or Occupation ... Chauffeur Book-keeper.

Height ... ... 5 feet 9½ inches.

Weight ... ... 145 lbs.

Chest Measurement: Girth when fully Expanded 35 inches. Range of Expansion 2 inches.

Physical Development ... Good,

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*) R.Gibson.
(*Rank*) Capt. C. A. M.C.
Medical Officer.

Enlisted ... ... at Esquimalt, B.C. on 11th day of May 191 5.

	Corps.	Regtl. No.
Joined on Enlistment ...	C. A. M.C.	
Transferred to	C.A.S.C. T. D.	400085

Became non-effective by ...

This Medical History Sheet has been compared with the Corresponding Attestation Paper, and entries made in red have been taken from the Attestation Paper.

on day of 191 .
(*Signature*)
(*Rank*) Lieut.-Col.
In Charge of Records,
Canadian Contingent.

(4887.) W. 9597/1588. 500M. 9/15. C. P., Ltd.

Forms B. 178 89

P.T.O.

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				
Moore Barracks H. Shorncliffe	19	1	16	3	2	16	Infl. Rt. Knee joint.	15	Monks Horton.	J.B. McMurrick C.A.M.C.