REGIMENTAL DOCUMENTS

NAME Pte. BELL GEORGE ROBERT REGT. NO. 3-2-3-2-3-4 UNIT 4th Bn. C.M.G.C. H. Q. FILE NO. 11343

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)	6MR 7-7-19.	M			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)					
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category Demob
1	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)		H			
	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
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	M.F.W. 67.					
2	Disp. Cert.					
2	Mis					
1	C.A.D. 5009					
1	A/12					

W. 2589
100M-11-18
17-8-39-1877

A.M.C. Training Depot No. 11, C.E.F. Original

ATTESTATION PAPER.

No. 525254

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Bell,
1a. What are your Christian names?	George Robert.
1b. What is your present address?	~~1734. 27th Ave.~~ 1675 14th ave E Vancouver. B.C.
2. In what Town, Township or Parish, and in what Country were you born?	Campbellford. Ontario.
3. What is the name of your next-of kin?	Helen Ekron Bell.
4. What is the address of your next-of-kin?	~~1734. 27th Ave.~~ 1675 - 14th Ave E Vancouver. B.C.
4a. What is the relationship of your next-of-kin?	Wife.
5. What is the date of your birth?	January 4th 1881.
6 What is your Trade or Calling?	Insurance Agent.
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 Robt Bell, 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 Robt Bell (Signature of Recruit)

Date 19th April 1917 J M Glennon (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, George Robt Bell, 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 Robt Bell (Signature of Recruit)

Date 19th April 1917. J M Glennon (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 Vancouver this Twentieth day of April 1917.

A Greenhalgh (Signature of Justice)

M. F. W. 23
750M—3-16
H. Q. 1772-39-241

Description of Bell, George Robert. on Enlistment.

Apparent Age 36 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height	5 ft 5 1/4 ins.	
Chest measurement. Girth when fully expanded	35 ins.	
Chest measurement. Range of expansion	2 ins.	
Complexion	Light	
Eyes	Blue grey	
Hair	Fair	
Religious denominations. Church of England		
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).

1. Vac L. (faint)

Small scar across back of L. hand.

Small scar L. shin.

Small wart front of neck.

Nearing R. L. Normal.

VISION: Right 20/40 Left 20/80

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 April 19th 1917.

Place VANCOUVER, B. C.

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:—

MOBILIZATION BOARD
VANCOUVER CENTRE

J. Bell, Capt. President

D. Pinkham, Capt. Member

E. A. Saunders, Lt.

CERTIFICATE OF OFFICER COMMANDING UNIT.

George Robert Bell 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.

A. MacPherson (Signature of Officer)
Major
O. C. A. M. C. Training Depot No. 11, C.E.F.

Date MAY 21 1917 191 .

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge
Class "A" No.

THIS IS TO CERTIFY that No. 525254 (Rank) Private

Name (in full) George Robert Bell enlisted in

the 6 a.m.b. Training Depot No 11

CANADIAN EXPEDITIONARY FORCE at Victoria B.C. on the 19th

day of April 1917

HE served in England and France with 4th Bn. C.M.G.C.

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 38

Height 5' 4 1/4"

Complexion Light

Eyes Blue Grey

Hair Fair

G R Bell

Signature of Soldier.

Marks or Scars Nil

Date of Discharge

No. 2 District Depot
Toronto, Ont.
JUN 26 1919

Issuing Officer.
For
O.C. No. 2 District Depot.

Rank

Date JUN 26 1919 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.

P. 880.

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

Certified this document
Registered with
Confidential documents.

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

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

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

1. Christian names George Robert 2. Surname Bell

3. Rank Pte 4. Original Unit C.A.M.C 5. Reg. No. 525257

6. Address, in full, to which future payments of gratuity are to be forwarded
2056 Beach Ave
Vancouver B.C.

7. Date of enlistment in the C.E.F. 25th April 1917

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Mrs G.R. Bell

9. Relationship of such dependent Wife

10. Address, in full, of such dependent 2056 Beach Ave
Vancouver B.C.

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:—

13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States?

14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service

C.A.M.C 6 wks. 16 Res. 9. mos 47. Bn. 15. mos

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 6 Weeks Canada 9 Months England 15 Months France

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

5434. Wt. /30P. 150,000(8). 2/19. S.O., F.Rd.

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. No

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid No

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

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?

24. Are you now serving in the C.E.F.? If not, give:—(a) Date of discharge 21/6/19 (b) Reason for discharge DEMOBILIZATION

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit in which you served at the front, and dates of such service with that unit

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?

(b) If so, are you in receipt of full pay and allowances from that Department?

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

Signature of Applicant: George Robert Bell

Place of Residence: 2056 Beach ave. Vancouver B.C.

Declared before me at: Brandshott Camp

This 31 day of May 1919

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

"Questions 12, 13, 14, 20, 24, 25, 26 and 27 are unanswered."

Medical Officer

POST DISCHARGE PAY.

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

Certified Correct.

District Paymaster.

M.B. 103. CANADIAN CORPS CAMP, BRAMSHOTT.

To:- Officer Commanding H.A.C.M.G. Bn

The following is a Special EYE Report on the undermentioned. Your M.O's. attention should be called to it, and the case should now be paraded with this report in TRIPLICATE, the Medical History Sheet, and the Casualty Form, to:-

The LONG Board, as there ~~is not~~ IS a disability of the EYE.

Name Bell J.R. Number 57 82 574 Rank Pte.

Unit H.A.C.M.G. Bn Former Occupation Salesman

Original Disease or Injury Myopic Astigmatism

Date of Origin Congenital Place of Origin

Cause Congenital

Present Disability

VISION:- RE:- 6/12 ph LE:- 6/24 WITH GLASSES:- RE:- 6/9 LE:- 6/18

Category Recommended B1

History or present condition Eyes gave trouble when learning shooting. Has worn glasses for years.

Did the disabling condition have origin before enlistment? No

If so, has it been aggravated by Service?

Has the disability been caused or aggravated by Intemperance or Improper Conduct, or by unreasonable refusal to accept treatment? No

What is the present duration (in months) of the disability? Permanent

Can the Former Trade or Occupation be resumed? Yes

Fundi:- Nil

Date 10-5-19

W.E. Campbell Capt
Major, C.A.M.C.
Officer i/c Medical Board.
Eye & Ear Department, Bramshott.

C. A. M. C.
Original

MEDICAL HISTORY SHEET

Surname Bell, Christian Name George, Robert

Examined { on APR 19 1917 day of 191
at VANCOUVER, B.C.

Birthplace { City or Town Campbellford
County Ontario

Apparent age 36

Trade or occupation Insurance Agent

Height 5 feet 5 3/4 Inches

Weight 120 lbs.

Chest measurement { Minimum 32 inches
Maximum expansion 35 inches

Physical development Good

Small-pox Marks none

Vaccination Marks { Arm Right — Left
Number — 1

When Vaccinated last Childhood

(a) Marks indicating congential peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

ATTENTION DENTAL CORPS

Approved by MOBILIZATION BOARD VANCOUVER CENTRE
FIT
J. Bulley Capt. President
Rank D. Nicholson Capt M.O.

Date	Fit or Unfit	Examined for Re-Engagement
		E.E. Jacobsen Capt M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations
19/5/17		Wm. H. Taylor Capt. Can. M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
19/5/17		Wm. H. Taylor Capt Can. M.O.
26/5/17		A.K. Connolly Capt Can. M.O.
2/6/17		E.J. Blakely Capt. R.A.M.C. M.O.

1917 6 13 Yale 603

Enlisted on day of MAY 14 1917 at VICTORIA, B. C.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	A.M.C. TRAINING DEPOT No. 11, C.E.F.	5252554		MAY 14 1917
Transferred to 16th. Canadian Reserve Battalion. 47th Bn			27	

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
East Sandling	18-9-17	Def. Vision	Att H. A. Culham Capt. C.A.M.C.
Def Branshot	13-5-17 Def	Vision Cat A. H. A. Macdonell Capt	

JUN 9 1917
Classification Board Victoria BC

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

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

VISION: Right 20/40 Left 20/80 Hearing normal
T.B. + Eye Exam
Treasury Dept Capt
Member
Member

Surname Bell Christian Name George Robert

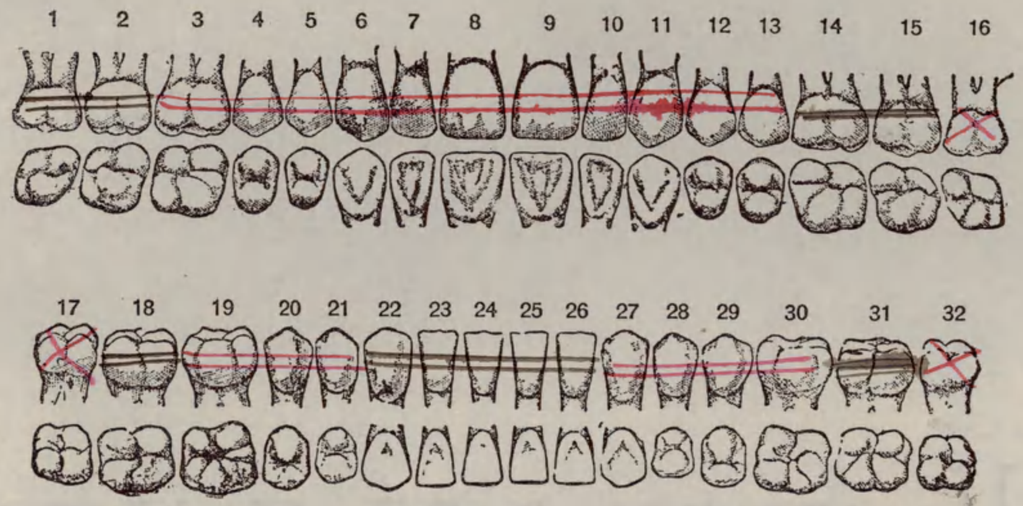
STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases 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				
VICTORIA. B. C.	MAY 14 1917										

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS District No. 2 M.D. 11.

Name of Soldier G. R. Bell. Rank Pte. No. 522554

Regiment C. A. M. C.



INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show :

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	OPERATOR	Military Dist.	REMARKS
1917.																					
Condition on first Examination June 9.										21 3 to 13 16 to 17 19 to 21 27 to 30 32.									Examined by Lieut F. J. Bezzaan 11.		
Treated from " " to —										11 1-2-3-4 13-14-15-16 29-30-31-32 31									F. J. Bezzaan Lieut 11.		F/4 F.L. Plate required

M.F. 65
2/0M
1772-38-350

To be made out in duplicate.

H.Q. 54-21-23-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

---

(1) Name of Overseas Unit which Soldier joins... A/M.C.Training Depot No,11 C.E.F.

(2) Regimental Number ... 525254

(3) Full Name of Soldier ... George Robert Bell

(4) Place of Birt ... Campbellford, Ontario, Canada

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

(6) If married, state,
(a) Full name of your wife ... Helen Eckron Bell

(b) Present Postal Address ... 1675 - 14th Ave, East, Vancouver B.C.

(7) Are you a widower ? ... No

(8) Have you any children ? ... Yes

If so, give number of boys and girls ... 1 boy 1 girl

Also their names and ages ... Helen Davidson (7) John Andrew (5)

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

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

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

(10) Is your Mother alive?.....Yes.....

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

.....Sintaluta, Sask, Canada.....

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

Are you her sole support, or not?.....No.....

(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?.....Yes.....

If so, in what Company?.....Prudential Assurance Coy of America
Western Mutual Assurance Coy.

Have you made arrangements for payment of your Insurance premium.....Yes.....

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

-

.....
Officer Commanding.

Date.....JUN 27 1917.....

Major
O. C. A. M. C. Training Depot No. 11, C.E.F.

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-9-20.

W.S.B. Class 66 A

Casualty Form—Active Service.

Draft no 16 to CAMC TD. A.M.C.

Unit, Regiment or Corps ..... TRAINING DEPOT No 11 C.E.F. .....

Regimental No. 525254 Rank Pte Name BELL, George Robert

C. E. F.

Enlisted (*a*) 14/5/1917 Terms of Service (*a*) ~~C.E.F~~ Service reckons from (*a*) ~~May 14th 1917~~

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*) Insurance Agent

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	Montreal	12-7-17	R. Rs. L. Instructions
		Disembarked	Liverpool	24.7.17	"
25/7/17	C.M.C.S.	TAKEN ON STRENGTH from Canada	Seaforth	12.7.17	Pte 2-00206
		No leave granted at this depot.			
8-10-17	Do	S.O.S. to 16th Res Bn Seaford.	Shorncliffe	8-10-17	Pte II D.C. A MacKay Rees CAPT. ASST. ADJUTANT FOR O.C. C.A.M.C. DEPOT
OCT 1 9 1917	16 Res Bn	Taken on Strength	Seaford	OCT 1 9 1917	Pte 2 D.C. 283.
15/2/18	16 Res Bn	Transferred for Overseas Service with 47th Bn.	Seaford	14/2/18	Pte 2 D.C. 46 Lieut. Adjt. 16th. Canadian Reserve Batt.

CERTIFIED CORRECT. 21 FEB 1918 RANK, BRIGADE, LONDON.

EMBARKED AT MONTREAL JUL 25 1917 H.M.T. CANADA

(*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.

525254 Pte Ball. G.R.

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				
15-2-18	R & CB	Arr'd in France & T.O.S 4th C.M.G. Bde		14-2-18	D.O.13 of 19-2-18
19-2-18	Do.	S.O.S to 6 B.R.C.		19-2-18	T.R. 985.
23/2/18.	Unit	Joined Unit		24/2/18	A 213. A 213. 11.5.18.
11-5-18.	R. & Rs. C.M.G.	S.O.S 4th C.M.G. Bde on Transfer to 4th Bde. Coln. M.G. Corps.		1.5.18.	a.g. Canada. A.G. 7-1-177. of 2/5/18. C.C.S. a/105/220. of. 6.5.18. K.A. 290-286/1. D.O 46. of. 20/5/18 (3) 290-286-1
2-5-18	A.G.	T O S 4th C M G Corps Proceeded to England	Field	2-5-18	C.C. 058 of 2/5/18

6 MAI 1919

G.J. Skelton
Lieut. for Lt Col. A. A. G.
Canadian Section, G.H.Q. - 3rd, Ech.

T.O.S. "D" Wing, C.C.C. per part II No. ..... Date 7 - MAY 1919
S.O.S. on proceeding to Canada.

P II.O. 44 6/6/19

JUN 6 1919 O.S.
JUN 21 1919 S.O.S.

T. O. S. No. 2 DISTRICT DEPOT, TORONTO 1919 PART II D. 172
(DISCHARGED FROM H. M. S.) No. 2 DIS. DEPOT, PART II D. 172

W. C. Roberts
Lieut,
For O. C. No. 2 District Depot.

Form R 122.
2353—100M—9-12-16.

CR Rank Name BELL. George Robert. Reg'l No. 525254.

Unit If in perm. Corps, What Unit? Married or Single Married.

Dft. No 16 AMC to CAMC.. TD. 1

Place and Date of Enlistment Vancouver, B.C. Apr.19th, 1917. Place of Birth Campbellford, Ont.,

Name and Address, Next-of-Kin Helen Ekron Bell.
1675 - 14th Ave., E. Vancouver, B.C., Canada. Relationship Wife.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No 11411
File R.L.
Calgary OK. CAN

H. W. & V., Ld.—9546-16.

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.			S/S Athenia
25-7-17	Camden	Tos.	W'hanger	12-7-17	Pte. II 206
18-10-17	Do.	S.O.S to 16th Res Bn	Sh'cliffe. Pte	18.10.17	" — 291 → 16 "Res Pte 253
15-2-18	16th Reserve	SoS to 47th Bn. 10 3rd 19 2nd 18 M	Seaford "	14.2-18	— 46 & 47th Bn
21-5-18	47 Bn Dowling	SoSto 4 Can Mtg C.	Field —	1-5-18	Bn D 40 X 58 — 4th Bn. 4/21-5-18
9.5.19	CCC.	TOS Jnr 4th Bn Cen Sc	Bishott ..	6-5-19	— 36.
		83 - I - 116 - date 6-6-19.			
2-5-19	4 Cen Sc	Proc to Eng	Fd Pte	6-5-19	— 39
6-6-19	Ward CCC	SoS to Canada	Bishott —	6-6-19	— 44

525254, BELL, GEORGE ROBERT.

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.				

C.A.D.C. 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) BELL, G. R.

REGIMENT 6 M G C RANK Pte No. 553254

Date of Examination in England 9/5/19 | Date of Examination in France

DIRECTIONS TO DENTAL OFFICERS

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

27

PRESENT DENTAL REQUIREMENTS

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

HAS HE EVER REFUSED DENTAL TREATMENT ? —

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

- (a) In Canada —
- (b) In England yes
- (c) In France

BRAMSHOTT CAMP

Signature of Dental Officer E. G. Berry Capt

SPECIAL EYE REPORT

Seaford.....Dec 7 T.....1917.

Number S·2 5·2 5·4 R. 6/21 With Glasses 6/9
- S·0 sph c +45 axis 60

Rank. Pte

Name. Bell G. R L. 6/21 With Glasses 6/9
-1.25 S. axis 15.

Unit. 16th Res

Complaint:-

This condition was.....was present before enlist-

ment and has not been caused by Service.

Glasses have been ordered. Frame D
P. D 63

Category.....A.....

Treatment:-

Captain. C.A.M.C.

D/E 14-5-17

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
50m.–6-16.
1772—39—818.

Sheet No. 2. Helen E. Bell Wife Name of Soldier Bell, George R

Pte

L. L. Job 4503.–Req. 6832.

525254

Month.	Year.	Cheque No.	Amt.	Remarks. a.m.c 7D11
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June		16 DM E 8642	31	31 R 1675 – 12th Que E Vancouver
July		10379	20	20 Durie 1d B.C
Aug.		T 13270	20	
Sept.		S 16440	20	B 91
Oct.		N 22460	20/11	T
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

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.				

L. L. Job 4503.—M. & D. 6832.

D/E 14-5-17 17

MILITIA AND DEFENCE

M. F. W. 11.
50m.—6-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Helen E. Bell

Pte 10

Address ~~1734 - 27th Ave~~ 1675-14th Ave E, Vancouver B.C

Relation to Soldier wife, child or mother } Wife

Name of Soldier Bell. George R

Regtl. No. 5252254

Rank Pte

Corps A. M. C. S. D No 11

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 6 ACCOUNT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
18m.—4-17.
1772—39—819.

Sheet No. 2. Mrs Helen E Bell (wife)
(Assignee)

Name of Soldier Bell Geo Robt Pte 325254 AMC 32 #11

L. L. Job 19227—M. & D. 7814.

JUL 1 1917

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916		20 00	
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July		F27796	20	
Aug.		B30664	20	
Sept.		X54114	20	
Oct.		R.47452	20/40	
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

CA

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.				

L.L. 19226—M. & D. 7814.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
25m—4-17.
H. Q. 1772-39-819.

To Whom Mrs Helen E Bell (wife)

Address 1675 - 14th Ave East
Vancouver B.C.

Rate 20.00

JUL 1 1917

By Whom Assigned Bell George Robt

Regtl. No. 525254

Rank Pte

Corps A.M.C. 3D #11

PAYMENTS

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

CONSOLIDATED ACCOUNT 3

SURNAME. Bell

CHRISTIAN NAMES George Robert

REGL. No. 525254 RANK Pte

UNIT C. A. M. C. (V. D. #11) (9th. R. D.)

FORMER CORPS Nil.

CARD NO. 4

1/2

D.A.D.O. 21-6-19

Demob. FOLL

No 172 of 21-6-19

2 D.O.

NEXT OF KIN.

NAMES IN FULL Bell Mrs. Helen Ekron

RELATIONSHIP TO SOLDIER Wife

ADDRESS ~~Suite 10, 1875 14th Ave E.~~ Vancouver

2056 Beach Ave. B. C.

CHANGE OF ADDRESS

R. SCAP. 4/7/17. Zyl W

Scap P. 30/8/19

COUNTRY OF BIRTH Canada Campbellford Ont. DATE Jan. 4th 1881

PLACE OF ATTESTATION Vancouver B.C. DATE Apr 20th 1917

O/S 13-7-17 9th D 2.

R/C 13-6-19 347/55

L. L. 10437. M. & D. 7253.

M. F. W. 22. 100M.—11-16. H. Q. 1772-39-339.

MARRIED Yes. SINGLE WIDOWER

TRADE OR CALLING Insurance Agent. RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE 36 YEARS MONTHS

HEIGHT 5 FEET 5 1/4 INCHES

CHEST MEASUREMENT 35 INCHES EXPANSION 2 INCHES

COMPLEXION Light EYES Blue grey HAIR Fair

DISTINGUISHING MARKS Vac. L. (faint) Small scar across back of left hand. Small scar L. shin. Small wart front of neck.

MEDICAL EXAMINATION. PLACE Vancouver B.C. DATE Apr. 19th 1917

Present Address 1675-14th Ave E. Vancouver B.C.

C.M.H.

B

V

Number. 525254 Rank Pte

Surname. BELL

Christian Name. George Robert

Unit. 47th Bn. Can. Inf. Theatre of War. France

Date of Service 14/2/18

Remarks

Latest Address 253 Ontario Street

Vancouver B.C.

Roll No. Page 3887

G.Q 6655 Mexico. MAY 1 3 1921

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

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

Group 13
Checked by No. 14
Date 3-6-19

M.D.
D.A. 1
O.C. 3

M

SHORT FORM. War Service Badge Class "A" No. 376811

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

EMBD. S.S. OLYMPIC No. 33
EMBD S'M T'N JUNE
LEMBD H'FX JUL 12

1. No. 525254
2. Rank. Private
3. Name. BELL, George Robert.
4. Unit. 4th Bn Can Regt.
5. Date of Discharge JUN 26 1919 Place Toronto Ont.
6. Reason for Discharge DEMOBILIZATION
7. Authority. No. 2 District Depot, Part II, D.O. No. 172
8. Proposed Residence after Discharge 2056 Beach Ave 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. ?

G. R. Bell
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place No. 2 District Depot Toronto, Ont.
Date JUN 26 1919

Signature [illegible] (O. C. Discharging Unit.)
For
O.C. No. 2 District Depot.

M.F.B. 218a—300M.-11-18—1772-39-113.

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.

Yes

19. Is the invalid fit for

(*a*) General service,	(Category A)	(Yes or No.)	Yes cat A.
(*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.)

Boarded and Ll. A/ 9085 5/11-11-18

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.

D. McLaurin Capt *President.*

PLACE Bramshott

DATE 13-5-19 F. H. Macdonnell Capt. } Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

President

PLACE.....

DATE..... } Members

APPROVED BY H. Mackenzie Capt for *Assistant Director of Medical Services.*

DATE 13/5/19.

APPROVED BY *Director-General of Medical Services.*

DATE.....

THIS FORM WILL BE USED FOR ALL RANKS

D. 27

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 Bramshott Camp DATE 13 May 1919.

1. 1 (*a*) Unit 4th Bn 6th M.G. (*b*) Regimental No. 525254 (*c*) Rank Pte.
(*d*) Surname BELL (*e*) Christian name George Robert
(*f*) Home address 2056 Beach Ave Vancouver B.C.
(*g*) Next of Kin Mrs. H.E. Bell (*h*) Relationship wife
(*i*) Address of Next of Kin 2056 Beach Ave Vancouver B.C.
2. Age last birthday 39 Date of birth Jan 4: 1880
3. Enlistment, or Appointment (if an Officer) (*a*) Place Victoria B.C. (*b*) Date 1914/1/7
4. Personal description: estimated 14 stone.
(*a*) Height 5 feet 5½ ins. (*b*) Weight 125 lbs (stripped) (*c*) Complexion fair
(*d*) Colour of hair brown (*e*) Colour of eyes blue (*f*) Identification marks, Scars, etc. none.
5. Former trade or occupation Insurance agent.

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
	2	20

	Periods	
	From	To
Canada	19/4/17	12/7/17
England	12/7/17	14/2/18
France or other theatres of War	14/2/18	6/5/19

7. Original disease, or injury (Wound) Shell Contusion
(*a*) Date of origin 10 - 5 - 19. (*b*) Place of origin Camadar
(*c*) Cause Contusion

M. F. B. 227.
400M.—11-18.
1772-30-117.

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.)

Mild astigmatism
"Defective Vision"

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.)

Specialists Report.
Vision:
Rt. 6/12 Rt. 6/9
with glasses 6/
Lt. 6/24 Lt 6/18
10. 5. 19. W.E. Campbell. Capt.

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

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

Special Senses.....no.....Respiratory System.....no.....Integumentary System.....no.....

Disturbances of Mentality.....no.....Digestive System.....no.....Muscular System.....no.....

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

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

Eyes were always weak. Refraction.
Glasses for years.

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*).)

none.

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

none

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

(*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.)

no

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment?.....no (a+b)

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.)

Specialists Report
10. 5. 19 W.E. Campbell. Capt.

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)

no.

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

17. Recommendations.....

none

W.E. Campbell Capt.
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 Pte. Bell G.R. 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 nothing.
RH.

G.R. Bell Pte. Rank.
Signature of invalid examined.

R.H.M.

"OLYMPIC" 12-6-19

B 6397

DISPERSAL "T"

AUDITOR | PAYMASTER

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

REGT. No. 520204 RANK Pte. NAME (IN FULL) B E L L , G.R. (BLOCK LETTERS SURNAME FIRST)

M. & R S.

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Yes Closed by Ottawa — DATE EFFECTIVE 30/6/19

TO WHOM PAID Same — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
See Adjts		

ORIGINAL UNIT C.E.F. C.A.M.C. — IF IN P.F. WHAT UNIT? Same

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 20-4-17 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 20 — DATE EFFECTIVE 30/6/19 — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS: Closed by Ottawa

PAYABLE TO Mrs Helen E Bell

ADDRESS 2056 Beach Ave. Vancouver B.C.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE Toronto — DATE 21-6-19 — REASON Demob — AUTHORITY DO 172 — IF ENTITLED TO POST DISCHARGE PAY Yes

T.O.S. 5/6/19 D.O. 172

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	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.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	BALANCE CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																			594		Can Bal Eng & PL
31/5/19							594		594																												
21/6/19	21	1.10	23	10													340		Endorsed on L & PL																1/6/19 to 21/6/19 PA Clothing Allowance 1st payment to D.S.G.
					35	-																															
					70	-																			20	-											June " "
																	487	5	-																		Boat & Train
							128	10									Cheque		70	10											13	40					
			W.S.G.		S.A.																				W.S.G.		S.A.										
																																					Due Soldiers Dep.
																									21/6/19		70	-								W.S.G. Paid as above
153 dys			350		150		500																				9	-	1	79	280		141				9 days S.A. overpaid 1st W.S.G. Paid by [illegible]
																	APR 87	July 14	975047	975048							70	-	51	-	210	-	90	-			
																	AR 118	Aug 12	988714	988715							70	-	30	-	300	-	140	-	60	-	
																	AR 136	Sep 12	1354485	1354486							70	-	30	-	400	-	170	-	30	-	
																	AR 167	Oct 20	1360776	1360777							70	-	30	-	500	-					
																	~~AR 191~~	~~Nov 18~~	~~1369487~~	~~1369488~~							-		-								
			350	-	150	-	500	-																			350	-	150	-	500	-					

W.S.G. PAID IN FULL

CAPTAIN
FOR PAYMASTER WAR SERVICE GRATUITY

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1390.

P. 559
MARRIED OR SINGLE Married

PLACE OF BIRTH Campbellford Ont.

NAME AND ADDRESS OF NEXT OF KIN Mrs Helen Ekron Bell
1675 10th Ave E Vancouver BC

RELATIONSHIP OF NEXT OF KIN Wife.

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Dvr Canada 28th Aug 25 1917		

ADMISSIONS TO HOSPITAL, &c.

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

REG'L No. 525254. RANK Pte NAME Bell, George Robert

IF IN PERMT. CORPS WHAT UNIT | UNIT 100 Depot | TRANSFERRED TO | DATE | AUTHORITY

PERMANENT FORCE ALLOWANCES | TRANSFERRED TO | DATE | AUTHORITY

PLACE OF ATTESTATION Vancouver BC | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 19/4/17. | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY MONTHLY $ 20.00 DATE EFFECTIVE 1/7/17.

PAYABLE TO Mrs Helen Ekron Bell, 1675-10th Ave E Vancouver, BC RELATIONSHIP Wife

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) C 1/7/17

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	C.	REMARKS
July 1														5-	5-																5-					
Aug 31	100		34	10										34 10	68 20													20	20	40	33 20					34.10 Pay July 2.00 A Pay
Sept 30	"		33	-										39 10	33 - 106 20													20 40	20 60	40	46 20					

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE
Oct.									46 20
				Can ass.				20.	
				AR 534 29/8 cancd	9 73				80 30
				464 15/8 do	14 60				54 06
	1 Pay	34 10		9/17 28/9 "	9 73				26 24
		34 10			34 06			20	
Nov				618 14/9 do	2 44				93 34
	0 Pay Nov	33						20	42 44
	" Dec	34 10		Dec				20	50 90
		67 10			2 44			40	

Ford. over leaf.

MONTH 1918	CR 1	CR 2.	Particulars	DR 1	DR 2	BALANCE	DEFER SEP. MED. ALLCE. PAY ENGD

5252254 Bell G. R.

DATE 1918	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
	PARTICULARS	CR. 1	CR. 2	PARTICULARS										DR. 1	DR. 2	DR. 3		DR. 4		BALANCE															
	Dr. Bal																			5090															
Jan.																				20															
				On AR 684	25/10/17	16th Res.								730																					
				" 686	25/10/17	do								487																					
	P Pay		34 10	" 807	23/11	do								487								85													
				" 831	7/12	do								487								5164													
				" 741	14/11	do								243																					
				" 861	20/12	do								730								3336													
			34 10											3164							20														
Feb	P Pay		30 80			Assg Pay															20	44 16												
			30 80																		20	20.00												
																						44.16												
																						34.10												
																					20	78.26												
																						51.06												
Mar	PP		34 10			Car.															20	27.20												
				On AR 1206	29/1/18	"			a/30					730																					
				On AR 785	29/1/18	"			a/31					243																					
				On AR 1405	24/2/18	"			a/35					357																					
				On AR 1460	8/3/18				a/37					446																					
				On AR 1579	29/3/18				a/41					357																					
				" 1066	14/1/18	"			a/41					973																					
			34 10											3106							20	2720												

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:- 1/7/17		EFFECTIVE DATE:-	
AMOUNT:- 20		AMOUNT:-	

NAME:- BELL George Robert.

NUMBER:- 525254

NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

Mrs Helen Elson Bell.
1675-14th Ave. E. Vancouver
B.C. Can. Wife.

Stopped 1.6.19.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private

UNIT AND TRANSFERS

ORIGINAL UNIT:- Cumbd

DATE ACCOUNT FIRST OPENED:- 19/4/17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
58: 21/5/18	1/6/18		4Bn. M.S.C.
~~58:~~			

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
26.4.19	241	4 Bn Cully.	~~3 49~~				
14.5.		B'shott	~~53 33~~				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 -	10		

PARTICULARS OF RENDERING NON-EFFECTIVE:- Trans. to Canada 1/6/19 Ref K 9180 Bram 13/5/19 - Bram 17/5/19 HRD 2. Cr. balance 5.94 Nil deferred.

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
March 31	Bal. Forward.								27 20		
April	Pte Pay	33 -							60 20		
				C&P				20 -	40 20		
				DMR 3. 47th Batt. 7/4/18 a21	3 57				36 63		
		33 -			3 57			20 -			
May	Pte Pay	34 10							70 73		
				C&P				20 -	50 73		
				DMR 47th Batt. 2/4/18 a11	4 46				46 27		
				DMR 294 — " — 16/5/18 a18	3 57				42 70		
				DMR 218 4th Bn C&W 16/5/18 a10	4 46				38 24		
		34 10			12 49			20 -			
June	Pte Pay	33 -							71 24		
				C&P				20 -	51 24		
				AR. 439 18.6.18. 4th & 5th B	3 57				43 21		
				DMR. 957. 30.5.18. 47 Bn.	4 46						
		33			8 03			20			
July	P. P.	34 10		C&P				20			
				AR 533. 3.7.18 4th & 5th Bn	4 46				49 28		
				" 690 16.7.18 "	3 57						
		34 10			8 03			20			
Aug	" "	34 10		C&P				20	63 38		
Sept.	" "	34 10 33 -		C.a.P.	- -			20 20			
				" 889 3.9.18 "	10 71						
				" 1055 15.9.18 "	3 57				62 10		acct agrees
Oct.	" "	33 - 34 10		C.a.P.	4 28			20 - 20 -			
				" 1771. 5.10.18. "	3 73						
				" 1373 20.10.18 "	1 87						
				" 1443. 31.10.18. "	3 73				66 87		acct
		34 10			9 33			20 -			

NUMBER 525754 RANK NAME BELL George Robert.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Oct	1918			Bal. forward.					6687		
				aR 1593 7.11.18 4 mg Bn	3 73						
				" 1723 21.11.18 "	13 06						
				" 1849. A. 17.18 "	27 39						
				" 1955 - 15.12.18 "	3 73						
Jan	P.P. Nov — Jan.	101 20		C.a.P.				60 -	6516		
		101 20			4291			60 -			
				" 2125. 6.1.19. "	3 73.						
				" 2245 - 18.1.19 "	3 73						
				" 2385 5.2.19 "	3 73						
				" 2491 17.2.19 "	3 73						
				" 2590 5.3.19 "	3 65						
				Rm. 94 21.3.19 V.C 15433	25 00						
March	✓ Feb + nack.	64 90		e.a.P.				40 -	4649		
		64 90			4357			40 -			
				aR 2769 27.3.19 4 mg Bn	3 65						
				" 125 16.4.19 "	3 49						
				" 4 7.4.19 "	3 49						
Apr.	✓	33 -		caP.				20			
May	✓	34 10		caP				20			
				$25.00 Rm 19/3.							
				aR 2411 28.4.19 "	3 49						
				" 846 14.5.19 Dcee	53 53				594		
		67 10			67 65			40			
				2917. 30/5/19. Dbbe. Bend	34 07						
					34 07				2813		

S.O.S 6.6.19 Sh. 83

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

B 44869

Date of Enlistment: 14-5-17.

Date of Assignment: July-17

RATE OF SEPARATION ALLOWANCE

~~20~~	1-12-17 25	30	

RE 3257 1-9-18
P@2753
M.O. 29644

RATE OF ASSIGNMENT

20			

PARTICULARS OF SEPARATION ALLOWANCE

No. 525254

Rank Pte Promoted Reverted Discharge

Soldier's Name George Robb Bell

Battalion A M C 2nd H

Beneficiary Mrs. Helen E. Bell

Relationship Wife

Address

W.T.W. 2554 Received 25 7/18 18-11-18

PARTICULARS OF ASSIGNMENT

(wife)

Name Mrs Helen E Bell

Address ~~1675 - 14 Ave E Vancouver~~ ~~Suite D.~~ Change of Address BC

1 ~~2075~~ Beach Ave Vancouver B.C. 6/18

2 2056

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
Oct 31 17		111	80	191		01244-G-67
Nov	F 51231	20	20	40		MO 98749 a 3/5/19
Dec 1917	D 59129	20	20	40	83	
Jan	O 65981	30	20	50	D	
Feb	B 99550	25	20	45	✓	
Mar	A 95869	25	20	45	✓	
apl	A 8688	25	20	45	C	
May	E 6379	25	20	45	✓	
June	D 14591	25	20	45	✓	
July	X 28857	25	20	45	✓	
AUG	B 33837	25	20	45	✓	
SEP	B 38861	25	20	45	✓	
OCT	O 43777	25	20	45	✓	
NOV	A 59985	25	20	45		
DEC	A 65586	45	20	65		
JAN	D 71291	30	20	50		
FEB	D 79330	30	20	50		
MAR	D 90249	30	20	50	✓	
APR	E 1723	30	20	50	✓	
MAY	B 6677	30	20	50	C	
JUN	B 9914	30	20	50	C	
		656	480			

M. F. W. 128.
4'OM. 6-7-1 72-39-1141
L. L. 22320—M. & D. 7003.

AUDITED.

A/c Closed 30. 6. 19

Ret'd per Olympia 6 M.D.2

Date 12-6-19 M.F.W.187 20/19 M.O. 126670

Clerk Caulfield

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

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.
4'0M. 8-17—1772-39-1141
L. L. 22820—M. & D. 1933.