

ATTESTATION PAPER.

118TH OVERSEAS BATTALION C.E.F.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?.....Pantry,
- 1a. What are your Christian names?.....George Edward,
- 1b. What is your present address?.....Goodwood, Ont.
2. In what Town, Township or Parish, and in what Country were you born?.....Battle-Sussex, England,
3. What is the name of your next-of kin?.....Dr. Barnadoes Home,
4. What is the address of your next-of-kin?.....50-52 Peter St. Toronto, Ont.
- 4a. What is the relationship of your next-of-kin?.....do.
5. What is the date of your birth?.....July.17th.1897.
6. What is your Trade or Calling?.....Farmer,
7. Are you married?.....No.
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?.....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.



DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, George Edward Pantry, 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.

Date Dec. 27th. 1915. 191 George E Pantry (Signature of Recruit)
A Wilson (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, George Edward Pantry, 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.

Date Dec. 27th. 1915. 191 George E Pantry (Signature of Recruit)
A Wilson (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 Uxbridge, Ont. this 18th day of Feby. 1916. 191

W. Hamilton (Signature of Justice)

Description of GEORGE EDWARD PANTRY. on Enlistment.Apparent Age 18 years 6 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer).

Height..... 5 ft. 4½ ins.Chest measurement { Girth when fully expanded..... 35½ ins.
Range of expansion..... 2½ ins.Complexion Dark,Eyes Brown,Hair Black,,Religious denominations { Church of England.....
Presbyterian.....
Methodist..... X
Baptist or Congregationalist.....
Roman Catholic.....
Jewish.....
Other denominations.....
(Denomination to be stated.)

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 Dec. 27th. 1915. 191Place Uxbridge, Ont.James Moore
Capt.
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.

Geo. E. Panty 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.Date Dec 27 191 5 J. Sharpe (Signature of Officer)
Lieut. Col.

REGIMENTAL DOCUMENTS

Pte

NAME **PANTIRY**

GEORGE EDWARD

REGT. NO. **745156**

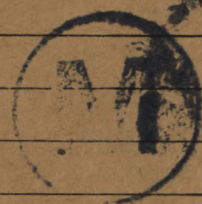
UNIT **19th Bn.**

H. Q. FILE NO.

34/10
11/6/14

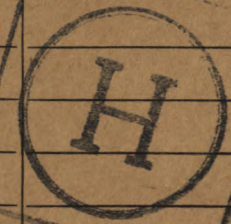
CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
TRAINING HISTORY SHEET (M.F.W. 113)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT.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

RECORDS DEPARTMENT
PUBLIC ARCHIVE



1863.

AO-292-755



42-11
23-11
2-11

481276

2



SURNAME.

Pantry

CHRISTIAN NAMES

George Edward

REGL. NO. 745156

RANK Plt.

UNIT 116th

FORMER CORPS nil

NEXT OF KIN.

NAMES IN FULL

Barnardo Home

RELATIONSHIP TO SOLDIER

R.N.S.

ADDRESS

50-52 Peter St., Toronto
Ont.

COUNTRY OF BIRTH

England Battle, Sussex

PLACE OF ATTESTATION

Uxbridge, Ont.

DATE

July 17th. 1897

DATE

Feb. 18th. 1916

CARD NO.

Area 2

S.O.S. 24/5/19 Demob
Do. 15/10/21/5/19 #28.1

CHANGE OF ADDRESS



Sailed from Halifax 28-7-16. 491

Olympic 28-7-16. 491
R/C 22-5-19 329/8306 28

MARRIED

SINGLE *yes*

WIDOWER

TRADE OR CALLING *Farmer*

RELIGION *Methodist*

DESCRIPTION.

APPARENT AGE *18* YEARS *6* MONTHS

HEIGHT *5* FEET *4 1/2* INCHES

CHEST MEASUREMENT *35 1/2* INCHES EXPANSION *2 1/2* INCHES

COMPLEXION *Dark* EYES *Brown* HAIR *Black*

DISTINGUISHING MARKS *nil*



MEDICAL EXAMINATION. PLACE *Uxbridge Ont.* DATE *Dec. 27th, 1915*

Present Address Goodwood, Ont.

PANTRY, George *Rank*

Pte.

Reg. No. 745156

Unit

19th. Battalion

Next of Kin

Canada

[illegible]

[illegible]

NAME

RANK AND CORPS

CABLE

No.

DATE

NATURE OF CASUALTY

REG'T L NO

H. Q. FILE NO. 649-

FOLLOWS

No.

FOLLOWS

N. of K. Barnardo. Home. (R. N. S.) 50-52 Peter St.
 Toronto, Ont.
 18-4. Q 201. 24-4-18. adm. # 5: Fld. Amb. apr. 12th-1918. J.W.
 R. thigh. ✓

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
W 386.	5th Con. Fld. Amb	2-12-16	(Deafness) Dis. to duty.
a-193.	#5. Con. Fld. amb.	12-4-18.	gsw. R. Thigh
a-230.	Discharged.	15-4-18.	" " "
a-230.	#5. Con. Fld. Amb.	18-5-18.	Impetigo Deafness
a-230	#12 (U.S.A.) Gen. Ronen.	23-5-18.	" "
a-230	#2. Con. Depot Ronen	25-5-18	" "
a-250	No 11 Con. Dep Buchy	10-6-18	" & "
4262.	Boich -	29-6-18	" " "

gm ^{Howe}
Number... 745156

Surname... **PANTY** Rank... **W**

Christian Name... George Edward
Units... 19th B Co

Units 19th Bn C.A.M. Theatre of war France
Date of Service 5-10-18

Date of Service.....5-10-16

Remarks	

Latest Address, Gen. Del
Uxbridge Court
Roll No. 2222

Roll No.

B. Page 65-26.

Next of kin _____

Address on leave _____

Address on discharge _____

Transportation issued Yes Character on
 No Date discharge _____

Previous occupation _____ Date and place of
enlistment _____

Diagnosis _____ Date of Medical
Boards _____

Date

Remarks

*—Name will be given in full; surname first.

No. 743136 RANK

NAME *Canby Leo. C.*

T. O. S. 27-12-15
(L. O. 23 of 20-1-16)

UNIT 116th Battalion

M. D. 2

PAID			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
1915	1915			
Dec 27	Dec 31	✓		
1916	1916			
Jan		✓		
Feb		✓		
Mar		✓		
Apr		✓		
May		✓		
June		✓		
July		"		

UNIT SAILED

JUL 23 1916



GEORGE EDWARD.

Name

PANTRY

Rank

PTE

Reg. No. 745156

Unit

4TH C.I.T.M.B.

Next of Kin

CANADA.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
12-4-	No 5 Can 7 th Amb S.S.C.	Thigh	PTE	A193	0201	16846
15 4	DISCHARGED - Duty			A. 230		AFR. 36
18 5	No 5 Can 7 th Amb Impetuous	Impetuous		A. 230		20511
23-5-	No 12 (USA) Gen 4 Nov	Nov		A. 230		1572-7
25 5	No 2 Can Dep Romen	Impetuous		A. 230		1654
10-6-	No 11 Can Dep Romen	Impetuous		A. 230		2153-14
29-6-	Discharged to B.B. Yapple	Bo		A. 262		2422-10
12-4	No 5 Can 7 th Amb S.S.C.	Thigh	PTE			16846
15-4	Discharged to Duty	Bo				16846

[illegible]

Surname *Pantry* Christian Name or Names *G. E.* Reg. No. *445156*
 Rank *Plt* Unit *19th Batt* Co. *mic units* Troop *(4CLTMBY)* Batty
 Hospital *5 Can. Hld. Aub* Date of Admission *29.11.16*
 Transferred *5 Can. Field Amb.* Hosp. *12.4.18*
5: Can. Fed Amb. Hosp. *18.5.18*
12. (us. a) G. H. Rown Hosp. *23.5.18*
2 Can. Op Rones Hosp. *25.5.18*
 Diagnosis *Deafness*
 (1) Later Diagnosis (if changed) *G. S. W. Rt Thigh.*
 (2) *Suppurative Deafness*
 (3) *a.s.*
 Additional Diagnosis: if more than one state present

dis. 2.12.16

DISPOSITION

Date

CL. 15.12.16. A386

Disce. 15.4.18
REMARKS

24.4.18 A193.

4.7.18.

6.6.18 A230.

29.6.18 A250

15.7.18 A262.

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm

1. *11 C.D. Bucky*

10.6.18

2.

3.

4.

5.

6.

7.

ORIGINAL

745156

Approved by *H. Raccon*

Rank *Major* M.O.

Trade or occupation... Farmer

Weight 135 Lbs.

Physical development..... *Good*

Small-Pox Marks.....None

Date	Result	VACCINATIONS.
------	--------	---------------

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease None

8/5/16	James Moore	M.O.
--------	-------------	------

M.O.

M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
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(b) Slight defects but not sufficient to cause rejection.

3/3/16 OK James Moore M.O.

24/6. Dr James Moore M.O.

78716 OK James Moore M.O.

Enlisted on 27th day of December 1915 at Uxbridge Ont

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	116 th En.	745156		Dec. 27 th 1911

Transferred to..	19th Bn			
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STATION.	DATE.	DISEASE.	RESULT.
Wally	12/4/19	Def Hearing	B II <i>Wally</i>

M. F. B. 313.

150M.—8-15.

H. Q. 1772-39-439.

Christian Name:

Christian Name:

[illegible]

EYE, EAR, NOSE AND THROAT CHIRUR
Witley Camp, Surrey

.....11/4.....1919

UNIT.....19th Br.....

Reg No. 745156. Rank. Pte. Name. Pantrey, E.

Diagnosis.

Remarks.

Defective hearing due to
Both M.T.'s retracted and sclerosed
drumness due to impairment of both
the nerves and condition Mechanism

HEARING.

Rt

Lt

Rt

Lt

VOICE
WHISPER
WATCH

4 ft 6 in

RINNE
WEBER
SCHWABACH
FOK 256
FOK 2048
BONE COND'T

CATEGORY RECOMMENDED.

B11

CONDITION WAS _____ PRESENT BEFORE ENLISTMENT AND HAS Not
BEEN CAUSED BY SERVICE

HAS _____ BEEN AGGRAVATED BY SERVICE.

Lowthome
Captain C.A.M.C.
Ear Specialist
Witley Camp, Surrey

THE UNIVERSITY OF CHICAGO
LIBRARY

.....

.....

Diagnosis

.....

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URINALYSIS REPORT.
(For Board)

20

Reg. No. 745156

Rank, Pte

Name, Contry, S.E.

Unit

Sp. Gravity . 10118

Reaction . . . acid

Albumen . . . Nil

Sugar . . . Nil

Microscopic

Captain, C.A.H.C.
for Major, C.A.H.C.
O.C., Canadian General Laboratory.

(15-100-100)

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canada Printing and Stationery Services, London

DIRECTIONS TO
DENTAL OFFICERS

NAME OF SOLDIER (Block Letters)

PANTRY, G.

REGIMENT

19th Battn.

RANK

Pte.

No.

745156

Date of Examination in England

APR. 8 1919

Date of Examination in France

1. This form will be made out for each individual at the time of Demobilization in England or France.

2. Figures as per chart will be used to designate teeth concerned.

3. In reference to Partial Dentures the numbers of teeth thereon will be stated.



PRESENT DENTAL REQUIREMENTS

1. FILLINGS

3, 18, 30

2. EXTRACTIONS

3. CROWNS

4. DENTURES

(a) Full Upper

(b) Part Upper

(c) Full Lower

(d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

No

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

(a) In Canada

(b) In England

(c) In France

Signature of Dental Officer

M. P. Thomas
Capt.

REPLY TO
OFFICIALS

1. The first of the group
is the one which is
the most important.

2. The second of the group
is the one which is
the most important.

3. The third of the group
is the one which is
the most important.

THE
OFFICIALS

THE
OFFICIALS

THE
OFFICIALS

- (a) Full Upper
- (b) Full Upper
- (c) Full Lower
- (d) Full Lower

- (e) In Canada
- (f) In England
- (g) In France

Has the following been done: (a) (b) (c) (d) (e) (f) (g)

Signature of Official of the Government

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

Service Badge
Class "A" No.

THIS IS TO CERTIFY that No. 745156 (Rank) Pte

Name (in full) Pantry George Edward enlisted in
the 116th Bn.

CANADIAN EXPEDITIONARY FORCE at Uxbridge on the 27
day of December 1915

HE served in 19th Bn. in France.

Demobilization.

and is now discharged from the service by reason of

~~Medical Unfitness.~~

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

Age 21

Marks or Scars

Height 5'-4½"

Brown scar outer
aspect right thigh.

Complexion Dark.

Eyes Brown

Hair Black.

G. E. Panty
Signature of Soldier.

F. C. Hume

Issuing Officer.

Date of Discharge

No. 2 DISTRICT DEPOT

MAY 24 1919

TORONTO

For

O.C. No. 2 District Depot.

Rank

Date MAY 24 1919 1919

N.B.- AS NO DUPLICATE OF THIS CERTIFICATE WILL BE ISSUED, ANY PERSON FINDING SAME IS REQUESTED TO
FORWARD IT IN AN UNSTAMPED ENVELOPE TO THE SECRETARY, MILITIA COUNCIL OTTAWA, CANADA.

95

THAT

3. 1893

County

1893

25

Unbridge

1893

1893

1893

1893

21

1893

1893

1893

1893

1893

1893

1893

1893

1893

1893

1893

LTR

Rank

Name **PANTRY, George Edward**Reg'l No. **745156**

Unit

116th, Bn..If in perm. Corps, }
What Unit? }Married or Single **Single.**Place and Date of Enlistment **Uxbridge, 27th, December, 1915.** Place of Birth **Battle, Sussex, Eng.**Name and Address, Next-of-Kin **Dr Barnadoes. Home.****50-52 Peter St, Toronto, Ontario, Canada.**

Relationship

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

W/E. R.B. No. **28649**

File R.L.

Category **CAN. OR**

Discharge, Date and Place

Reason

Character

H. W. & V., Ltd.—7165-16.

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.				
5		Arr. in ENGLAND		26. M. 2. 2810.	
6-10-16	116th S.O.S.	on tfr. to 19th Bn.	B'shott.	5.10-16	Pt II 20.254.
9.10.16	19th	Taken on strength.	Field	6.10.16	" 62
16-12-16	"	Adm. No 5 Can. Field Amb	France	29-11-16	C.L. 386. Deafness
" "	"	Discharged to Duty.	"	2-12-16	" "
28-12-16	"	Attached 4th French Mortar Bty.	Field	14-12-16	Part II 088.
2.11.17.	✓	50S to 4th C.L.T.M.B.	Pte. ✓	2.10.17.	Pt. II 080
24.4.18	Misc. C.L.	Adm. 5th Bn. 70: Amb	"	12.4.18	C.A. 193. S.W.R. 7019
6.12.18	4621 M.B.	Sgt to 19th Bn	✓	14.11.18	Pt 41 (19th Bn) Pt 51274/6 1/18
7.4.19	19th Bn	Proc to England	"	5.4.19	Pt IO 25

A.F.B. 103 CHECKED
ma. 16 OCT. 316

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.				
14 4 19	O WING TOS FROM	19 Bn 6 4 /9			7 JL 60-9-62 15/5/19
24 6 19	OWING SOS TO COM	18 5 19	Pt 61		

DUPLICATE

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.....

(2) Regimental Number745156.....

(3) Full Name of Soldier.....George. Edward. Pantry.....

(4) Place of Birth.....Battle. Sussex. Eng.....

(5) Are you married, or not?No.....

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

(b) Present Postal Address.....Goodwood. Ont.....

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

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

If so, give number of boys and girls.....

Also their names and ages.....

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

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

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

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

(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.

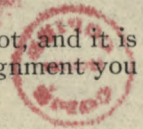
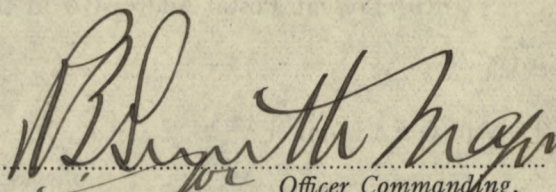
(15) Are you insured?.....No.

If so, in what Company?.....

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

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

Date.....July. 5. 16.




Officer Commanding.
116TH OVERSEAS BATTALION C.E.F.

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

Casualty Form—Active Service.

M. J. W. 54.
150M. 10-15.
H.Q. 1772-59-920.

Unit, Regiment or Corps 116th Overseas Battalion, C. E. F.

Regimental No. 745156. Rank Private. Name Pantry, George Edward

Enlisted (a) 27/12/15 Terms of Service (a) 16 months Service reckons from (a) 27/12/15

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

Extended _____ Re-engaged _____ Qualification (b) _____

Report	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received			
		Embarked, Canada,	Halifax.	23/7/16.
		Arrived. England,	Liverpool	31/7/16.
		Transferred for overseas service with 19th Battn. B'shore		
				for C.C. 116th Batt.
		Landed on strength	Field	6/10/16
6-10-16	C.B.D.	Arrived and taken on strength 19th Battn	C.B.D.	6-10-16 Nom. Roll
20-10-16	do	Left for Unit	field	20-10-16. Nom. Roll.
28-10-16	C.19 Bn.	Joined Unit	do	22-10-16. B.213.
2.12.16	567a.	Seafiness	567a.	29.11.16 a36 254 d/12/12/16
2.12.16	" "	To duty	Field	2.12.16 a36 254 d/12/12/16
8.12.16	Ob 19 Bn	Returned to duty	do	2.12.16 B213-256
15.12.16	do	Att'd to 4th T.M.B.	do	14.12.16 B213 P.T.O. No 88 d/28.12.16.
23 SEP 17	19 Bn	To effective strength.	Can. Corps Rein. Camp.	15 SEP 17 B213

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

[P.T.O.]

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
17. 10. 17	D. A. G.	S.O.S. of 19 th Bn on transfer to 4 th Bn. Light T.M. Battery	4 th T.M. Bty	2. 10. 17	K.A. 16-26272 + C.C.R.O. 1470 of 2.10.17 Pt. II Ord. 80. 4/11/17
2. 10. 17	aag.	J.O.S. 4 th Bdn (21) T.M.B. on transfer from 19 th Bn	Field	3. 10. 17	Pl a on 2. 10. 17
22. 11. 17	4 th T.M.B.	Granted 14 days leave		15. 11. 17	B213. No 9 d/31. 11. 17
5. 1. 18	"	Reported from leave		31. 1. 17	B213.
11. 4. 18.	6 C.S.A.	U.S.W. Thigh R.	To: ccs.	11. 4. 18	E 3572
12. 4. 18.	5 C.S.A.	do	5 C.S.A.	12. 4. 18.	E 3462.
15. 4. 18	do	do	to duty	15. 4. 18	E 4763
20. 4. 18.	4 th T.M.B.	Reported unit	field	15. 4. 18	B213
18. 5. 18	5 B.F.A.	Impetigo & deafness	Adm	18-5-18	H 2705
23. 5. 18	12 Gen Hpl.	do	Adm	23-5-18	H 3273
21. 5. 18	5 B.F.A.	do	To	23-5-18	H 3273
25. 5. 18	2 Gen Depot	not stated	Adm	25-5-18	H 3677
25. 5. 18	12 Gen Hpl.	Impetigo	To	25-5-18	H 3812
22. 5. 18	43 B.C.	do	To	22-5-18	H 3073
10. 6. 18.	2 Con Depot.	Sick	To	10. 6. 18.	H 6129
10. 6. 18.	11 do	Impetigo	adm	10. 6. 18	H 8134
20. 6. 18.	C.S.A.	No 8.	C.S.A.	30. 6. 18.	MR 950.
29. 6. 18.	11 Con Depot.	To Base A.	-	29. 6. 18	E 121.
8. 7. 18.	C.S.A.	Left for unit.	-	8. 7. 18.	MR. 134.
20. 7. 18.	4 th T.M.B.	Reported unit	field	7. 7. 18	B213
16. 11. 18.	Do.	J.O.S. of H T.M. Bn on Trans to 19 th Can Bn	Do.	14. 11. 18.	B213 900 H 10/1918. G.N.Q. 003/ 1139/320. 5892 (0) d/25. 11. 18. Cans G.N.Q. 7889 d/1. 12. 18.

83

12.

100

100

100

100

100

100

100

100



DEPARTMENT OF VETERANS AFFAIRS
MINISTÈRE DES AFFAIRES DES ANCIENS COMBATTANTS

DEATH NOTIFICATION
AVIS DE DÉCÈS

TO:
À:

DATE ..27-2-73.....

NAME Service No. CPC No.
NOM PENTRY, George E. Matricule No. 745156 CCP No. 132808

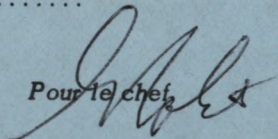
WVA No.
AAC No.

Information Received from: C.C. McGibbon, Barrister, 32 Simcoe St. S., Oshawa Ontario
Information reçue de:

Date of Death
Date du Décès ...31-12-72.....

Place
EndroitOshawa.....

Distribution: WSR-DASG
VI - ASS
DO - BD
HO - BC


Pour le chef,
for Chief, Central Registry Division.
Dépôt central des dossiers.



DEPARTMENT OF AGRICULTURE
MINISTER D. J. KELLY
OTTAWA, ONTARIO
K1H 8S9

22-2-73

132808

22156

132808, George A.

G.O. McQuinn, Minister, 32 8 rue St. J., Ottawa Ontario

22-12-72

Ottawa

MARRIED OR SINGLE *Single*

PLACE OF BIRTH *Battle, Sussex England*

NAME AND ADDRESS OF NEXT OF KIN *Dr. Barnados Home,
50-52 Peter St. Toronto, Ontario.*

RELATIONSHIP OF NEXT OF KIN

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.

[illegible]

REG'L NO. 745156	RANK Private	NAME Pantry	George Edward
IF IN PERMT. CORPS WHAT UNIT	UNIT 116th Batt.	TRANSFERRED TO 19th Bn.	DATE 16.10.16. AUTHORITY DO 257
PERMANENT FORCE ALLOWANCES		TRANSFERRED TO 4th Bn. Battery	DATE 1/1/18 AUTHORITY 1-1/1/17
PLACE OF ATTESTATION Exbridge, Ont.		TRANSFERRED TO	DATE AUTHORITY
DATE OF ATTESTATION Dec 27. 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)			

[illegible]

745156 Ike Panty & R.

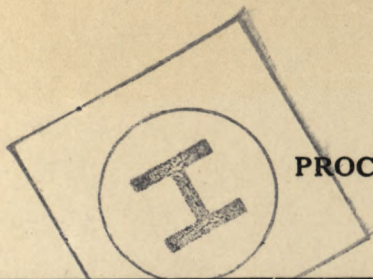
[illegible]

ASSIGNED PAY.		ENGLAND or CANADA.		SEPARATION ALLOWANCE.		ENGLAND or CANADA.		NAME:- PANTRY																			
EFFECTIVE DATE:-				EFFECTIVE DATE:-				NUMBER:- 745156																			
AMOUNT:- Nil				AMOUNT:-				PARTICULARS OF RANK OR APPOINTMENT																			
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.				AUTHORITY		DATE EFFECTIVE		RANK OR APPOINTMENT																			
								Private																			
								UNIT AND TRANSFERS																			
								ORIGINAL UNIT:- 116 th Bn.																			
								DATE ACCOUNT FIRST OPENED:- 1.8.16																			
								AUTHORITY		DATE EFFECTIVE		DATE LEDGER SHEET T'S F'D		UNIT TRANSFERRED TO													
														4 th Battalion													
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK								DAILY RATES OF PAY AND ALLOWANCES																			
DATE OF PAYMENT		NUMBER OF A.R.		UNIT PAID BY		AMOUNT		DATE OF PAYMENT		NUMBER OF A.R.		UNIT PAID BY		AMOUNT		AUTHORITY		PAY		F.A.		P.F.A.		SUBS'CE ALL'CE			
9.4.19		74		Witley		73												1				10					
23/7/19				L.P.C. Balance @ credit		\$547.22		30/4/19																			
PARTICULARS OF RENDERING NON-EFFECTIVE:- Transferred to Canada 1.5.19. AG95. 1 st C.O.R. 19.4.19. Witley to B'sk't. Disposal M.I. 2																											
MONTH 1918		PARTICULARS				CR. 1		CR. 2		PARTICULARS				DR. 1		DR. 2		DR. 3		DR. 4		BALANCE		DEFERRED		SEPARATION	
Mar 3		Bal Fwd.																				382 66		300			
April		R.P.				33				D.N. AR 56 - 20 Bn. 11.4.18				4 46								415 66		315			
										.. 64 .. 23.4.18.				3 57								407 63					
						33								8 03													
May		P.P.				34 10																441 73		330			
						34 10																					
June		P.P.				33				AR 789 - G.H.Q. 3 rd Ech. 1.6.18.				3 57								471 16					
										D.N. AR. 189. 20 Bn. 23.5.18.				4 46								466 70		345			
						33								8 03													
July		P.P.				34 10				AR 10593. 11 Conv. Dep. 18.6.18.				1 78								499 02		360			
										AR 582 - 4 th C.I.B. 26.7.18				3 57								495 45					
										D.N. AR. 5641. T.M.B. 7.7.18.				5 35								490 10		360			
										AR. 11761 - 11 Conv. Dep. 29.6.18.				1 78								488 32					
						34 10								12 48													
Aug		P.P.				34 10																522 42		375			
						34 10																					
Sept		P.P.				33				AR 910 - 18 + 20 Bns - 29.9.18.				10 71								544 71		390			
						33								10 71													
Oct		P.P.				34 10				AR. 1137 - 18 Bn - 24.10.18				7 46								571 35		405			
						34 10								7 46													
Nov		P.P.				33				26 AR. 405 - 4 th C.I.B. 13.11.18.				3 73								634 72					
Dec		P.P.				34 10				83 D.N. AR. 955. 26.11.18.				9 33								659 49		435			
Jan		P.P.				34 10																					
						101 20								13 06													

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
July	P.P.	3080		Butford	146				659 49	460	
				50 AR. 13/4. 19 Bn. 16-12-18.	6 49						
March	P.P.	3410		50 AR. 29/9. " " 23-1-19.	3 73						
				50 AR. 3446. 19 Bn. 6-2-19	3 73				568 17		
				50 AR. 4029. " " 22-2-19.	3 73				564 41		
				50 AR. 4914. 4 C.I.B. 8-13-19	3 65				560 71		
				50 AR. 4557. 19 Bn. 5-3-19	3 65				537 06		
									533 41		
April	P.P.	6490			170 98						
	Interest on Def. Pay.	33							586 41	495	
		33 81							620 22		
				AR 6033 28.3.19 4 C.I.B.	3 65				616 57		
				AR 574 13.4.19 O'Hing 6.6.6	73 00				543 57		
				" 2250 28.4.19 Endorsed "	9 73				533 84		
		6681			86 38						
June				AR. 3102 O'Hing C.C.C. Endorsed 9.5.19	9 73				524 11		
					9 73						

P.C.

S. D. 2. 1/2 Canada. 54. 60. And 2. 13.5.1919.



SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

War Service Badge
Class "A" 1.

D. A. I.
O. G. I.

199734

1. No.

745136

2 Rank.

Pte.

3. Name.

Pantry.

George Edward

4. Unit.

19th Bn.

5 Date of Discharge

MAY 24 1919
MAY 24 1919

Place

Toronto.

6 Reason for Discharge

DEMOBILIZATION



7. Authority.

No. 2. D.D., Part II, D.O. No. 151

8. Proposed Residence after Discharge

Gen. Del. Wexbridge Ontario.

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. E. Pantry

Signature of Soldier.

10.

CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

No. 2 DISTRICT DEPOT

Date

MAY 24 1919

TORONTO

For

Signature

O.C. No. 2 District Depot
(O. C. Discharging Unit.)

80
17.1.66

PROCEEDINGS ON DISCHARGE

1. No.	2. Rank	3. Name	4. Unit	5. Date of Discharge	6. Reason for Discharge	7. Authority	8. Proposed Residence after Discharge	9. CERTIFICATE TO BE SIGNED BY SOLDIER	10. CONFIRMATION
10077	Pvt.	George Edward	1st	May 24 1919	Discharged	W. S. D. 11, D.O. No. 121		I hereby acknowledge that at the underlined place and date I received my discharge certificate	The discharge of the above named man is hereby confirmed. Place _____ Date _____ Signature _____ Signature _____



LIST OF DISCHARGE DOCUMENTS

Attestation Paper, Triplicate	Form W. 28
or Particulars of Reason	Minutes Form W. 183
Field Card, Sheet	Minutes Form W. 178 or A.F.R. 122
Casualty Form	Minutes Form W. 24 or A.F.R. 103
Last Pay Certificate	Minutes Form W. 41
Certificates that military documents are indispensable	
Medical History Sheet	Minutes Form B. 818 or A.F.R. 175
Proceedings of Medical Board	M.F.B. 327, A.F.R. 179 or A.F.R. 18
Medical History Sheet	Minutes Form B. 165
Medical Report	M. R. W. 120 or A.M.S. 1875
Regimental Conduct Sheet	Minutes Form B. 253
Company Conduct Sheet	Minutes Form B. 253a

1. Attestation Paper (Form W. 28)
2. Particulars of Reason (Form W. 183)
3. Field Card (Form W. 178 or A.F.R. 122)
4. Casualty Form (Form W. 24 or A.F.R. 103)
5. Last Pay Certificate (Form W. 41)
6. Certificates that military documents are indispensable
7. Medical History Sheet (Form B. 818 or A.F.R. 175)
8. Proceedings of Medical Board (M.F.B. 327, A.F.R. 179 or A.F.R. 18)
9. Medical History Sheet (Form B. 165)
10. Medical Report (M. R. W. 120 or A.M.S. 1875)
11. Regimental Conduct Sheet (Form B. 253)
12. Company Conduct Sheet (Form B. 253a)

Group _____
 Checked by No. _____
 Date 8 MAY 1913

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate.....	Militia Form W. 23
or Particulars of Recruit.....	Militia Form W. 133
Field Conduct Sheet.....	Militia Form W. 178 or A.F.B. 122
Casualty Form.....	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate.....	Militia Form W. 44
Certificate that missing documents are unobtainable.....	
Medical History Sheet.....	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board.....	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet.....	Militia Form B. 465
Medical Report.....	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet.....	Militia Form B. 263
Company Conduct Sheet.....	Militia Form B. 263a

1. Triplicate Attestation Paper (M.F.W. 23), or
Particulars of Recruit (M.F.W. 133).
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).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group.....

Checked by No.....

Date..... 5 MAY 1919

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 Witley Surrey DATE 7-4-19-

1. 1 (a) Unit 19th Bn. (b) Regimental No. 745156 (c) Rank PTE
 (d) Surname PANTRY (e) Christian name GEO EDWARD
 (f) Home address Witley Surrey
 (g) Next of Kin Mrs. C. Panty (h) Relationship mother
 (i) Address of Next of Kin Bodiam Surrey Eng.
2. Age last birthday 21 Date of birth 17 July - 1897
3. Enlistment, or Appointment (if an Officer) (a) Place Witley Surrey (b) Date 27 Dec - 15
4. Personal description:
 (a) Height 5-6 (b) Weight 140 (c) Complexion fair
 (d) Colour of hair black (e) Colour of eyes brown (f) Identification marks, Scars, etc. Round scar outer aspect on thigh.
5. Former trade or occupation farmer

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).

	PERIODS	
	From	To
Canada	<u>27-12-15</u>	<u>24-7-16</u>
England	<u>24-7-16</u>	<u>5-10-16</u>
France or other theatres of War	<u>5-10-16</u>	<u>6-4-19-</u>

7. Original disease, or injury Otitis media

(a) Date of origin status boyhood (b) Place of origin Canada

(c) Cause Infection

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.)

(Ear drums sclerosed & retracted - Impairment of both nerves & conductive mechanism. ^{both ears} moderate degree of deafness. (Hf. Hearing)

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.)

Obj. Symptoms:— Special ear report written 11.4.19 sig. Capt. Hume. states:— "Deafness hearing due to both m.t.'s retracted and sclerosed. Deafness due to impairment of both nerves & conductive mechanism. Hearing voice R. 4 ft. L. 6 in. Rumi + R + L. Weber ← L. Condition was present prior to enlistment & not due to service. Has been aggravated by service. Recommended Cat B II.

Subj. Symptoms:— Deafness

(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

Urinalysis 1018 acid no act. a sugar

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

states he had slight discharge from ears in boyhood & has been somewhat deaf since & that deafness has become worse since being in France.

M.F.W 54 states in S.C.F.A. for Deafness 29.11.16 to 2.12.16 & again S.C.F.A. 18.5.18 to 23.5.18

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).)

M.F.W. 54, states in S.P.F.A. g.s.w. A. through 11-4-18
 A 15-4-18 & discharged to duty. In various
 hospitals same for Impetigo 18-5-18 to 10-6-18.

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

me

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.)

yes. States he could bear much better on
 enlistment than at present.

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?

six months.

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

M.F.W. 54 states in S.P.F.A. for Diarrhea
 29-11-16 & 2-12-16 & again in S.P.F.A. 18-5-18
 & 23-5-18.

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)

n-a.

16. Can the former trade or occupation be resumed?

(If not, briefly state why)

yes

17. Recommendations.

A. Archibald Elliot

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, George J. Panty, 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

[Signature]

G. J. Panty

Pte

Rank.

Signature of invalid examined.

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,
- (b) Service abroad, not general service,
- (c) Home service (Canada only),
- (d) Temporarily unfit.
- (e) Unfit for service in Categories A, B and C

- | | |
|--------------|--------------|
| (Category A) | (Yes or No.) |
| " B | (Yes or No.) |
| " C | (Yes or No.) |
| " D | (Yes or No.) |
| " E | (Yes or No.) |

Yes BIT

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.)

Granted for return to Canada until 12/9/19

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

DATE

Walter Sauer
12/4/19

President
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.

PLACE

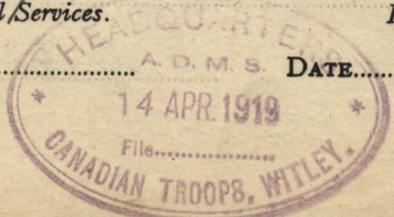
DATE

APPROVED BY

APPROVED BY

Assistant Director of Medical Services.
DATE

Director-General of Medical Services.



To:-

Date.....1919

O.C.....19 Bath.....

A special EAR report is required in the case of the undermentioned of your formation. The M.O. of your formation should arrange with for this examination direct with the Eyes and Ear Specialist of this Medical Board, and the undermentioned should parade to the Specialist with the slip attached below, properly filled. The SPECIALIST WILL NOT REQUIRE THE MEDICAL HISTORY SHEET OR THE CASUALTY FORM, and will deliver the special report to the soldier to hand in at the Orderly Room.

Number.....745156.....

Rank.....Pte.....

Name.....Pantley.....

.....M.O.
for Officer i/c Medical Board.

(Specimen)

Unit _____

(If Draft state number of Office
Ranks and Unit to which proceedi

No. Rank Name Inoculation

1	2	3	4
017110	Pte Fuller, J	TAB 3	11-
779432	Pte Smith, A.J.	TAB 3	21-
435678	Pte Robbins, F.	TAB 3	20-

MEDICAL OFFICER'S CERTIFICATE: (T

I hereby certify that I ha
answers opposite their names are t
to the A.D.M.S. Headquarters, Cana
Place..... (Sig

Date.....

NOTE: Column 4 TAB will be number
Column 5 should be initiall
Column 6 should be in handw
Column 7 should be in handw

ORDERLY ROOM TO DETACH AND FILL OUT

16

To:- Eye and Ear Specialist, C.O.C. Medical Board.

with you by the M.O. of this formation please furnish a Special ~~eye~~ ^{AS per arrangement} ~~ear~~ report on the undermentioned.

Number. 745156

Rank. Lt.

Name. Pandey G. S.

Asst. Duncan

.....Lieut.,

.....OFFICER I/c RECORDS, C.O.C.

Date....."O". Wing. C.O.C. ...1919

rs and Other
ng)

n. Date. Initial Vacc. Fit.
of M.O.

5

6

7

1-17	Yes	Fit
1-17	Yes	Fit
1-17	Yes	Fit

o go on last sheet)
ve examined the above.....men
rue and that a copy has been fo
dian Troops, Witley Camp.
ned).....

M.O.

(U

ed, 1, 2, 3 or 4.

ed by M.O.

citing of M.O. and initialled.

citing of M.O. (Fit or Unfit).

"CORONIA" 21.5.19
ONS AFFECTING

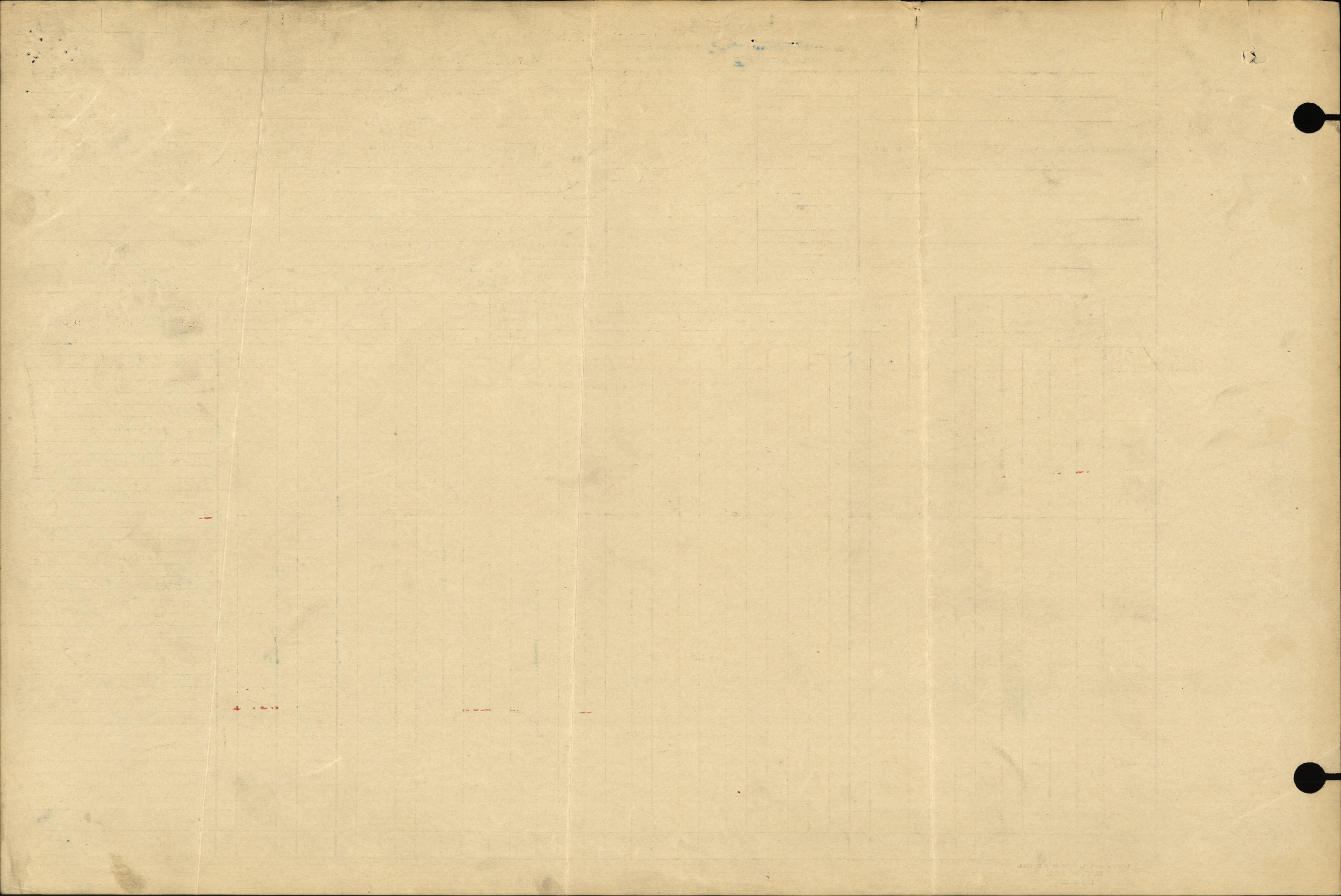
PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING
DAILY RATE OF PAY AND ALLOWANCES

M. OR S.

REGT. NO. 745156 RANK Pte NAME (IN FULL) PANTRY G.E.

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?	(BLOCK LETTERS SURNAME FIRST)
ADDRESS					B60MB- ✓	Woodward	14
					PLACE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
					DATE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				ASSIGNED PAY \$	DATE EFFECTIVE	
TO WHOM PAID	RELATIONSHIP			D	PAYABLE TO	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS
ADDRESS					ADDRESS		
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE	
					DISCHARGED	PLACE Toronto	DATE 24.5.19 ✓ REASON Dem ob. AUTHORITY D.O.151 IF ENTITLED TO POST DISCHARGE PAY yes

MONTH	PAY AND F.A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY		REGI-MENTAL CHARGES		OTHER CHARGES		TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS	
	NO. OF DAYS	RATE	AMOUNT		\$	C.	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3	\$	C.	\$	C.	\$	C.	\$	C.	DEBIT	CREDIT		
			\$	C.																				NO.
BALANCE FROM PREVIOUS ACCOUNT																							T.O. 514-5-19 D.O. 151	
30-4-19																							547 22	Q Bal Enfore
24-5-19	29	1 ¹⁰	31	90																			547 22	1-5-19 24-5-19 Pro
					35 00																			clerking
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																								5 days Pro over
18-3-19					W.S.G.																			W.S.G.
					420																			75 50 344 50
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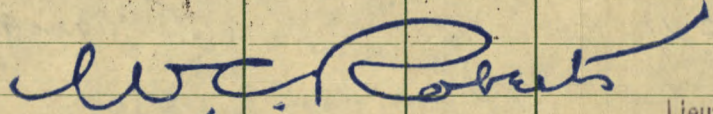
(SERVICE AND CASUALTY FORM Part II).

Regiment or Corps _____ Regimental Number _____

*Substantive Rank _____ Surname _____ Christian Names _____

*Acting Rank _____

(* To be entered in pencil to facilitate alteration.)

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received.	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer
MAY 14 1919	O. S.	T. O. S. No. 2	DISTRICT DEPOT, TORONTO	1919	PART II D. 151	
MAY 24 1919	S. O. S.	(DISCHARGED FROM H. M. S.)	No. 2 DIS. DEPOT, PART II D. 151			
						
Lieut. For O. C. No. 2 District Depot.						

Nothing to be written in this margin.

G.W.P. Co. (3496)

348

W1889 - PP1150 500,000

To be folded on this line.

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer

16-11-18	4 th Cr. Lt. T.M. By	P.O. 127 of 1918	T.O.S. 19 Bn. on trans. from 4 th Cr. Lt. T.M. By Joined	field	15-11-18	ditto P.O. 127 of 1918
17-11-18	19 Bn		Granted 14 days leave	19 Bn	15-11-18	B.H.3
29-11-18	"		Returned	"	26-12-18	B.213. Attd. Out 2. 7. 1918.
25-2-19	"			"	17-1-19	151. 17-345

Cdn. Embkn.
Camp

Proceeded To England - 6 APR 1919

NR.
Pt. II O.

* Sailing #60

S.S. CAFCNIA

Sailed T. L. O. Pool

S.O.S. O.M.F.C. ON

PROCEEDING TO CANADA

14-5-19

Witley

14-4-19, D.O. Pt. 2. #7.

D.O. PT. 2 No.

Walter F. Smith Lieut.

OFFICER I/c RECORDS,

Nothing to be written in this margin.

Lieut.
for Lt. Col., A.A.G.,
Canadian Section

MAY 13 1919