

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 2139582 (Rank) Gunner

Name (in full) George Russel ABEY enlisted in

the 2nd Depot Battalion B.C. Regt.

CANADIAN EXPEDITIONARY FORCE at Victoria, B.C. on the 8th

day of May 19 18

HE served in CANADA.

and is now discharged from the service by reason of Demobilization. Reduction of
Military Forces in Canada. Authy. R.O. 1357, sub-para 1 "a", d/25-11-18.

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

Age 21 years 8 months

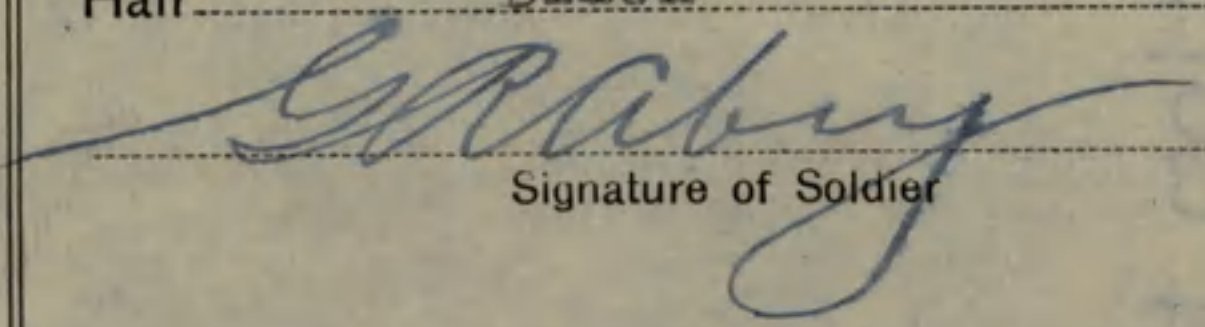
Height 5 feet 9 inches

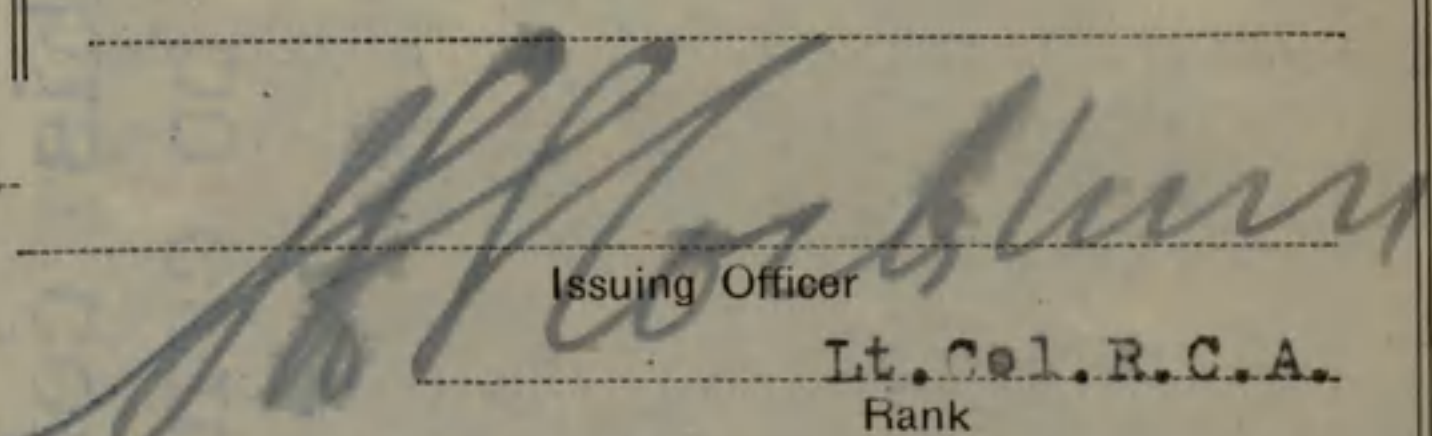
Complexion Dark

Eyes Brown

Hair Black

Marks or Scars


Signature of Soldier


Issuing Officer

Lt. Col. R.C.A.

Rank

Date of Discharge December 30th, 1918.

O/C No. X1 Artillery Depot.

Appointment

Signed at Esquimalt, B.C. this 30th day of December 19 18

in Military District No. X1

File Reference No. _____

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. (Rank) Name

Unit

Address on Discharge

Character and Conduct

Former Occupation

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at this day of 19

Name of Officer

Rank

Appointment

On demobilization the particulars called for on the back of this certificate will not be completed.

2nd Depot Bn.
B.C. Regt.

ARTILLERY (DRAFT)
MILITARY SERVICE ACT, 1917

MEDICAL HISTORY SHEET. ORIGINAL

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

1. Surname ABEY Christian name George Russell
 2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule.....
 3. Consecutive number on schedule of men reporting for service (if he appears on it).....
 4. Address (including street and number, if any)..... Kaslo, B.C.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 30th day of May 1918, by the undersigned medical board sitting at Victoria B.C.

5. Age as stated 21 Years 1 Months. 6. Apparent age 21 Years 1 Months
 7. Height 5 Feet 9 Inches. 8. Weight 184 Pounds.
 9. Chest measurement { Minimum 34 Ins. 10. Complexion Dark { Eyes Brown
 { Maximum 40 Ins. { Hair Black
 11. Physical development. Good { Good Fair Poor 12. Smallpox marks nil
 13. Number of vaccination marks { Right arm 0 14. When vaccinated last May 1918
 { Left arm 2
 15. Distinctive marks and marks indicating congenital peculiarities or previous disease.....

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

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A2
 17. (a) Vision R. 20/20 L. 20/20
 (b) Hearing. R. n L. n

M. A. [Signature] Member. [Signature] President.
[Signature] Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>23/6/18</u>	<u>Pos</u>	<u>[Signature]</u> M.O.	<u>23/6/18</u>	<u>[Signature]</u>	<u>[Signature]</u> M.O.
		M.O.	<u>1/7/18</u>	<u>[Signature]</u>	<u>[Signature]</u> M.O.
		M.O.	<u>10/7/18</u>	<u>[Signature]</u>	<u>[Signature]</u> M.O.

Joined 28th day of May 1918 at Victoria B.C.

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>2nd Depot Bn.</u>	<u>2139582</u>		<u>8-5-18</u>
Transferred to.....	<u>705 Coy. R.C.S.A. (C.E.F.)</u>			<u>21-5-18</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT

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

Signature of Man

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

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

350m.—5-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

2nd DEPOT BATT. B.C. REGT

Unit, Regiment or Corps
 Regimental No. 7139581 Rank Plt Name George Russell Abe
 C. E. F. C.E.F.

Enlisted (a) 8.5.18 Terms of Service (a) Service reckons from (a) 8.5.18

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

Extended Re-engaged Qualification (b) Military

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
<u>20.5.18</u>	<u>W.D. 11, W.D.</u>	<u>S.O.S. 2nd Depot Batt. B.C. Regt. transferred to W.D.</u>	<u>Victoria B.C.</u>	<u>20.5.18</u>	<u>P. 70 # of 2.22.5.18</u>
<u>21-5-18</u>	<u>O.C. 2nd Dep Batt. BC Regt. No. 5</u>	<u>Taken on strength of Coy. R.C.G.A. (C.E.F.)</u>	<u>Esquimalt B.C.</u>	<u>21-5-18</u>	<u>D.O.pt.2 #149 d/29-5-18</u>
<u>30-12-18</u>	<u>O/C No. XI Artillery Depot.</u>	<u>Discharged 30-12-18. Demobilization. Reduction of Military Forces in Canada. Authy. R.O. 1357, sub-para 1 "a" d/25-11-18</u>	<u>Esquimalt, B.C.</u>	<u>30-12-18</u>	<u>D.O.Pt.2 #192 d/30-12-18</u>

[Handwritten Signature]

Lt. Col. R.C.A.
 O/C No. XI Artillery Depot.

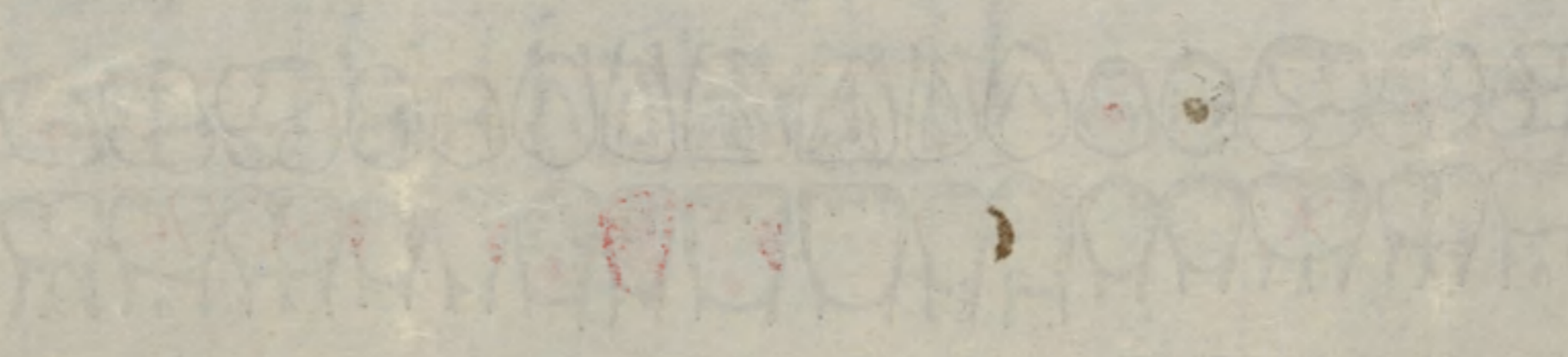
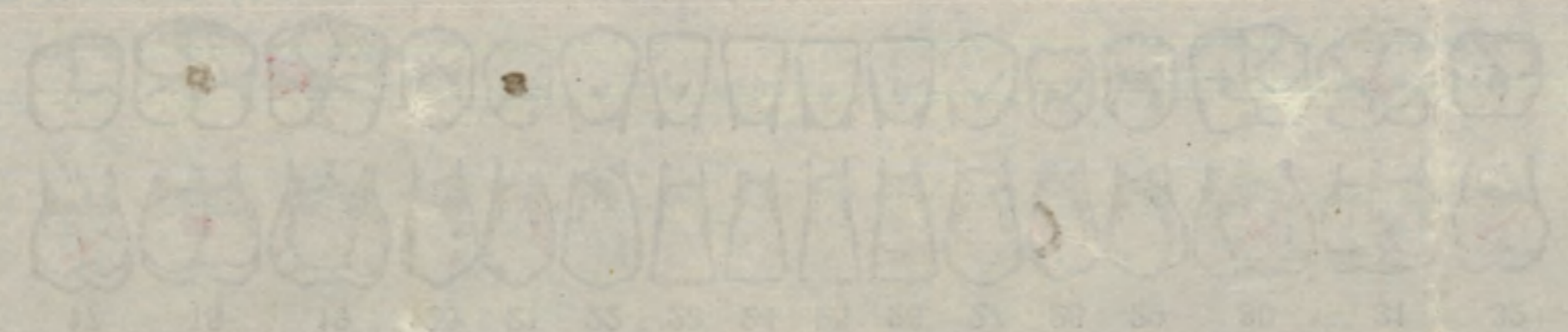
(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) e.g. Signaller, Shoeing Smith, etc. etc., also special qualifications in technical Corps duties. [P.T.O.]

1. DENTAL HISTORY SHEET

2. CANADIAN ARMY DENTAL CORPS

3. DISTRICT

1. Name	2. Age	3. Sex	4. Race	5. Religion	6. Education	7. Occupation	8. Service	9. Date of entry	10. Date of discharge	11. Date of re-entry	12. Date of re-discharge	13. Remarks



1. Condition on admission
2. Condition on discharge
3. Condition on re-admission (if any)
4. Date of admission
5. Date of discharge
6. Date of re-admission
7. Date of re-discharge

8. SIGNATURE

[The page contains extremely faint, illegible text, likely bleed-through from the reverse side of the document. No specific words or numbers are discernible.]

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 2139682 Rank Gunner Name ABBY, George, Russell

Corps No. 11 Artillery Depot who was* discharged

On 30th. December 1918, to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1st. December 1918, to 30th. December 1918, the inclusive date of transfer or discharge.

Dr.	\$	c	Cr.	\$	c
Bal. Dr. from prev. month			Bal. Cr. from prev. month	10.00	
Advances by Cheques } No.			Reg'tl Pay <u>30</u> days at \$ <u>1</u> c <u>-</u>	30.00	
} No.			Field Allow. <u>30</u> days at \$ <u>+</u> c <u>10</u>	3.00	
Assigned Pay No.			Other Allowances <u>Plain Clothes</u>	35.00	
Other Charges <u>Mulct pay 1-30 Dec.</u>	33.00		Other Credits*		
Payment on transfer or discharge No. <u>843</u>	45.00		Bal. Dr. (to be deducted by new unit)		
Balance Cr. (to be paid by the new unit)					
Total	78.00		Total	78.00	

*Give Particulars.

A monthly stoppage of \$ Nil (†) has Nil (‡) been paid on account of Assigned Pay for the month of December 1918 to (Assignee) _____
 (Address) _____

(†) Insert amount to be assigned, whether it has been paid or not.
 (‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer.

Outfit Allowance of \$ _____ has been paid by Paymaster, Military District No. _____

REMARKS:—

State (1) date of enlistment 8th. May 1918.

(2) if married and if a Separation Allowance Card has been submitted no no

(3) cause of discharge and authority Demob. Auth. R.O. 1357 sec. A-1-(a) dt. 25-11-18

If discharged from the Contingent, state if Stop Payment advice for Assigned Pay has been forwarded, and date _____

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date 30th. December 1918.

Place Esquimalt, B.C.

[Handwritten Signature]
 Lieut. Col. R.C.A. Paymaster
 No. 11 Artillery Depot

N.B.—For purposes of transfer this form is to be made out in quadruplicate. One copy to Paymaster of new unit; one to District Paymaster; one to accompany the pay-list at the end of the month, and; one for retention as a record.
 For purposes of discharge it is to be made out in triplicate. One copy to accompany discharge papers; one copy to accompany pay-list at the end of the month, and; one for retention as a record.

EXAMINATION.

THIS SECTION FOR USE OVERSEAS ---

Examined at(Overseas)

Date.....(Signed).....M.O.

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

(Signature).....

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

THIS SECTION FOR USE IN CANADA ---

Examined at(Canada)

Date.....(Signed).....M.O.

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

(Signature).....

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

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

By order of Col. H. Artillery Dept.

MILITARY DISTRICT II
VICTORIA, B.C.
JAN 2 1919
11 M.D. 34. A. 318

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

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

No. 21395-82 Rank 1st Lt Surname ABEY
(Given name in full) George Russell

Unit or Corps 5th Bn. R.C.S.A. Birthplace

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

1. GENERAL DESCRIPTION.

Physique Good Weight 184 lbs. Height 5 ft. 9 in.

Color of Eyes Brown Nutrition Good Pulse 72

Condition of Arteries Normal Identification Marks, scars or deformities

Vision 20 Rt. 20 Left. (Give cause and date of origin)

Hearing (Conversational Voice) Nil

Rt. 20 ft. Left 20 ft.

Opinion as to General Health and physical condition.

Both good

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

Nervous System No Genito Urinary System No

Muscular System No Cardio Vascular System No

Special Senses No Digestive System No

Intergumentary System No Disturbance of Mentality No

Respiratory System No Osseous and Joint System No

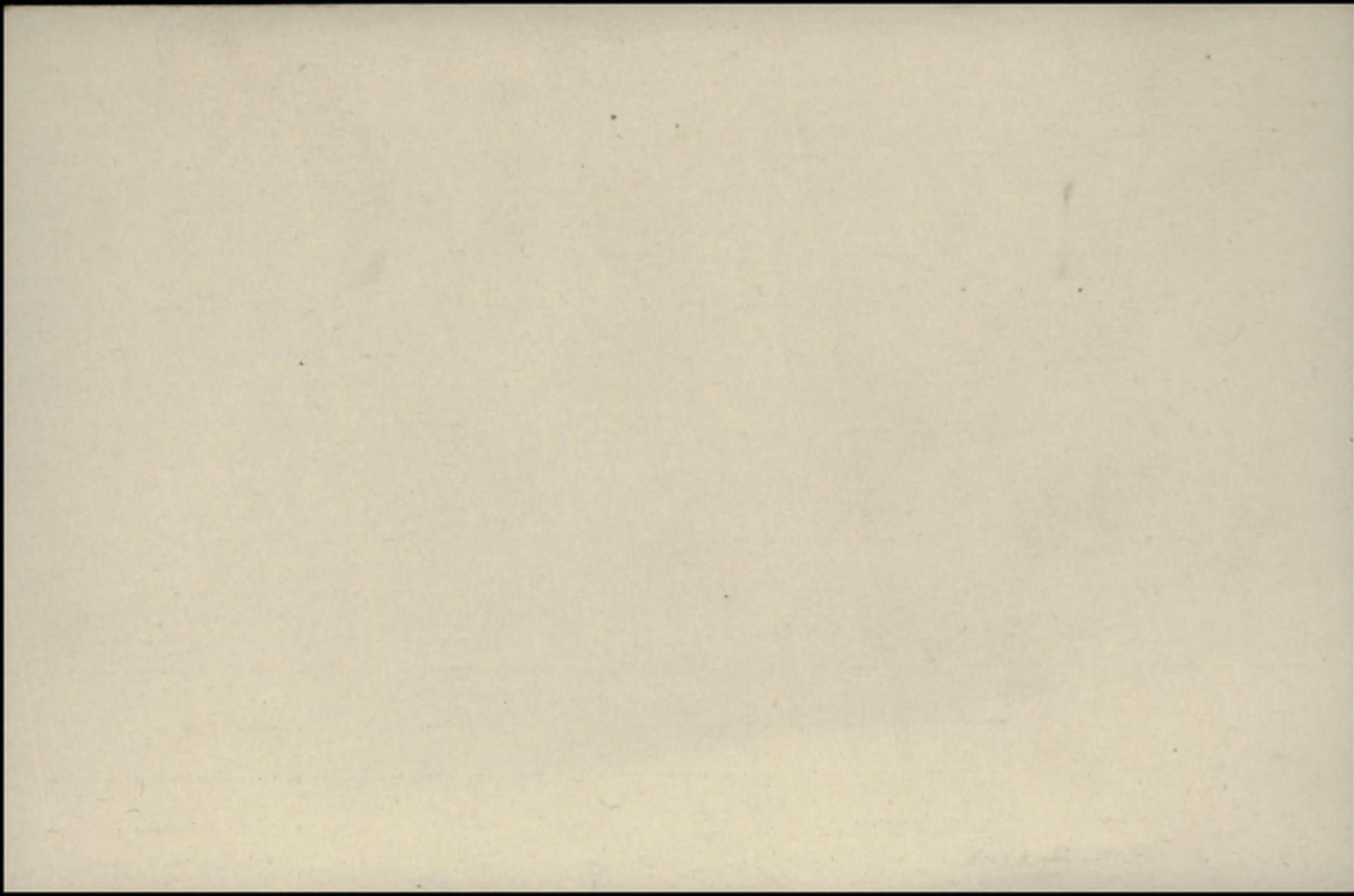
Other General Condition No

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

Surname *Abeey* H. Q.
 Christian names *George Russell* M. D. No. *11*
 Regtl. No. *2139582* Rank *Pte* T. O. S. *May 8th 1918*
 Unit *B.C. Regt 2nd Depo Bn* D. O. Pt. II *130 of 10/5/18*
 S. O. S. *Dis 30-12-1918*
 Reason *Demob*
 Auth. *00192430-12-18*
11 out of 100

Next of kin *Abeey Frank J.* Relationship *Father*
 Address *Naslo B.C.*
 Also notify:

BORN—Place *Canada Revelstoke B.C.* Date *April 3rd 1897*
 ATTESTED—Place *Victoria B.C.* Date *May 8th 1918*
 O/S R/C



CASUALTIES, &C.

NATURE E.G. ABSENCE, PROMOTION, &C.	PART II, D. O.		REMARKS
	No.	DATE	IF IN HOSPITAL, NOTE NAME &C.
Hospital	162	11-6-1918	Work Point (10-6-18 to 13-6-18)
Strength - Transfer	149	29-5-1918	Yd from 2 nd Depot B.C.R. 21-5-18
Probl. Leave of absence	231	19-8-1918	From 18-8-18 pending G.L. of a.
bondl. Leave of absence	148	16-11-18	From 24-10-18 "until further orders"
Strength Decrease	149	17-11-18	Assigned into No 1
Strength Increase	150	18-11-18	Act. Depot. D.O. # 1204

NAME ABEY, George Russel
REGIMENTAL NO. 2139582 RANK Gunner

MSA

ENLISTED AT Victoria, B.C. PROMOTIONS, &c.
AND DATE

DATE 8-5-18

~~PREVIOUSLY SERVED~~ PREVIOUSLY, STATE UNIT, &c. Category - A2

~~MARRIED, WIDOWER, OR SINGLE~~ Trade - Teamster

NEXT OF KIN RELATIONSHIP

ADDRESS OF

ASSIGNMENT OF PAY \$ C. TO

ADDRESS

SEPARATION ALLOWANCE, ENTITLED OR NOT

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

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

PMH
31-1-19

SHORT FORM.
 PROCEEDINGS ON DISCHARGE.
 (Demobilization)

MILITARY DISTRICT II
 VICTORIA, B.C.
 JAN 4 1918
 II M.D. 349 318

1. No.	2139582	
2. Rank.	Gunner	
3. Name.	George Russel ABEY	
4. Unit.	No. XI Artillery Dep't.	
5. Date of Discharge	30-12-18.	Place Esquimalt, B.C., Canada.
6. Reason for Discharge	Demobilization. Reduction of Military Forces in Canada.	
7. Authority.	Routine Order No. 1357, sub-para 1 "a", d/30-12-18.	
8. Proposed Residence after Discharge	Kaslo, B.C., Canada.	
9.	<p>CERTIFICATE TO BE SIGNED BY SOLDIER.</p> <p>I hereby acknowledge that at the undernoted place and date I received my discharge Certificate</p> <p>M. F. W. ? No. 39.</p> <p><i>George Russel ABEY</i> Signature of Soldier.</p>	
10.	<p>CONFIRMATION.</p> <p>The discharge of the above named man is hereby confirmed.</p> <p>Place Esquimalt, B.C.</p> <p>Date December 30th, 1918.</p> <p><i>W. M. ...</i> Signature Lt. Col. R.C.A. (O. C. Discharging Unit.) O/C No. XI Artillery Dep't.</p>	