

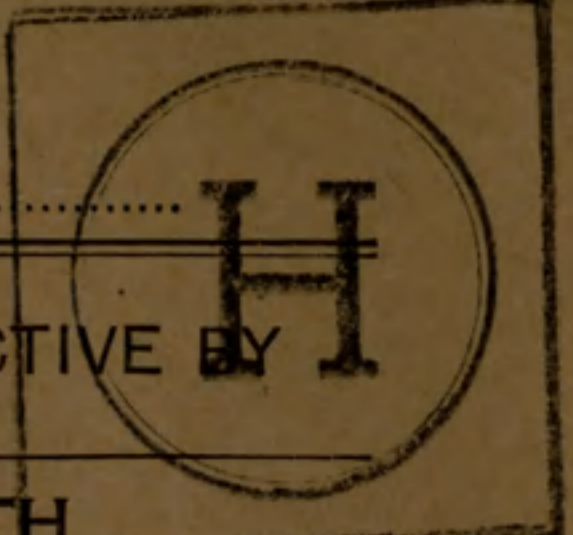
C.E.F. REGIMENTAL DOCUMENTS

NAME **ABBOTT GEO. HERBERT**

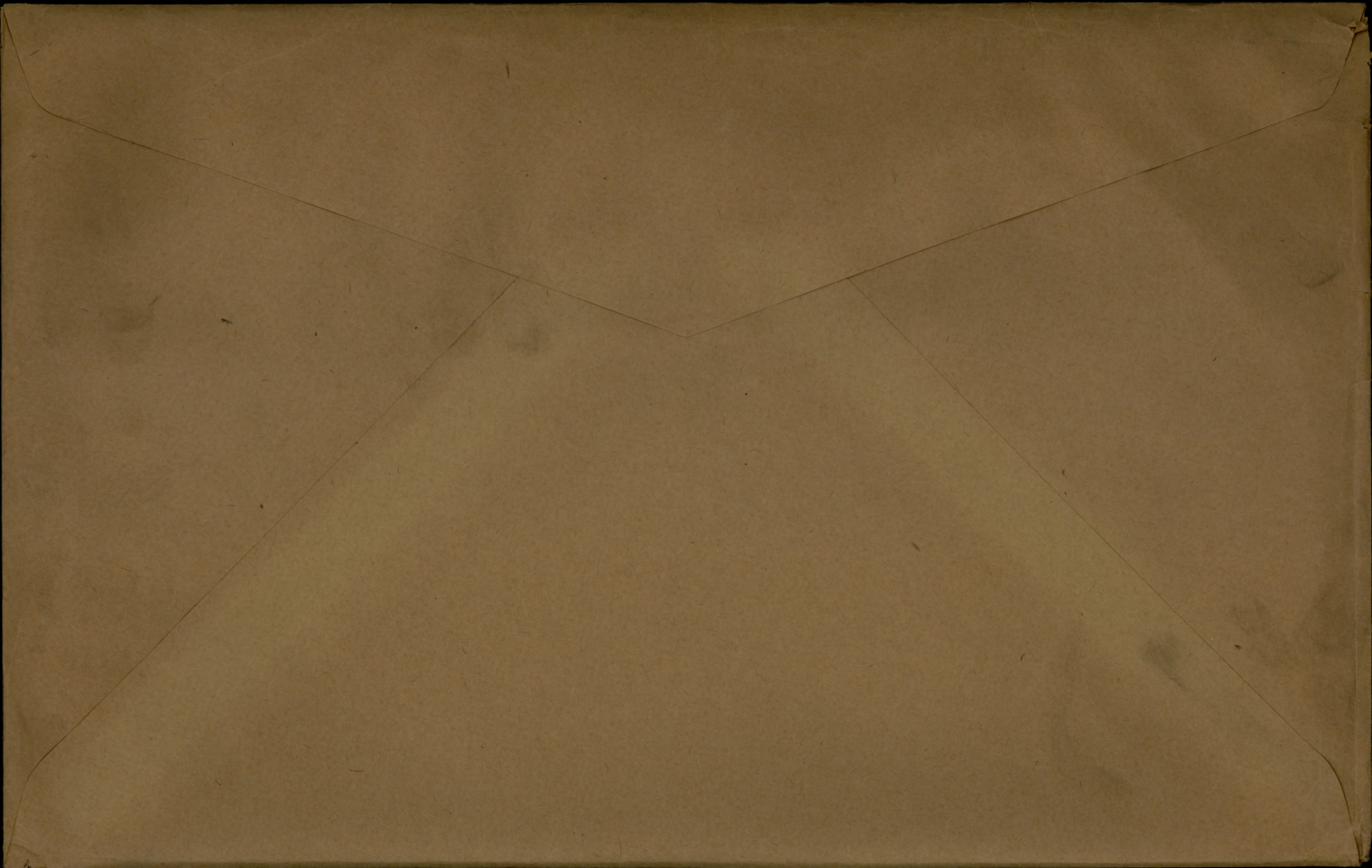
REGT. No. **1078012**

UNIT **5 PIONEER BN**

H. Q. FILE No. **150**



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 CATEGORY
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					
TRAINING HISTORY SHEET (M.F.W. 113)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					<i>Med 5 Jan 49</i>
REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					DISCHARGE CATEGORY
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 173)					
DENTAL HISTORY SHEET (M.F.B. 455)					
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					DESERTION
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)					
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)					
CARDS					
PAY-SHEETS					



ATTESTATION PAPER.

ORIGINAL

No. 1078012  
MAR 17 1916

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.  
(ANSWERS.)

- 1. What is your surname? Abbott.
- 1a. What are your Christian names? George Herbert
- 1b. What is your present address? 327 1st. Ave. Verdun, P.Q. Canada
- 2. In what Town, Township or Parish, and in what Country were you born? St. Malens, Lancashire, Eng.
- 3. What is the name of your next-of-kin? Ellen Abbott,
- 4. What is the address of your next-of-kin? 327 1st. Ave. Verdun, P.Q. Canada
- 4a. What is the relationship of your next-of-kin? Wife
- 5. What is the date of your birth? 20th July 1878
- 6. What is your Trade or Calling? Roman Bricklayer
- 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? 4th Field Coy. Can Engineers
- 10. Have you ever served in any Military Force? ---  
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, Abbott, George Herbert, 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.

G. M. Abbott (Signature of Recruit)

Date 17th March 1916. G. Parsons (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, George Herbert Abbott, 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.

G. M. Abbott (Signature of Recruit)

Date 17th March 1916. G. Parsons (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 Montreal P.Q. this 17th day of March 1916.

R. M. B. Lyle (Signature of Justice) or Court  
District of Montreal.



Description of George Herbert Abbott on Enlistment.

Apparent Age... 37 years 3 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. 6 1/2 ins.

*Third right finger slightly ~~finger~~ crooked.*

Chest measurement: { Girth when fully expanded... 37 ins.  
 Range of expansion... 3 ins.

Complexion... Fresh

Eyes... Blue

Hair... Grey

Religious denominations: { Church of England... Yes  
 Presbyterian...  
 Methodist...  
 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... Wed 17 1916 *W. M. C. [Signature]*

Place... Montreal P.Q. Canada *W. M. C. [Signature]*  
 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.

George Herbert Abbott... 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.

MAR 17 1916

*A. R. Lordly* Lieut. Colonel  
 Officer Commanding  
 5th Overseas Pioneer Battalion C.E.F.

Date... 1916

# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate

This is to Certify that No. 1078012 (Rank) Private

Name (in full) ABBOTT, George Herbert enlisted in  
the 5th Pioneer Battalion

CANADIAN EXPEDITIONARY FORCE at Montreal, QUEBEC on the 17th  
day of March 19 16.

HE served in FRANCE

and is now discharged from the service by reason of

ON DEMOBILIZATION MEDICALLY UNFIT FOR GENERAL SERVICE

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

Age 47 years

Height 5 feet 6 1/2 inches

Complexion Medium

Eyes Grey

Hair Grey

G. H. Abbott  
Signature of Soldier

Marks or Scars

Deformity of right hand, ring

finger.

K. W. [Signature] Captain,  
Issuing Officer, District Depot No. 4.  
Officer i/c Discharge Section

Rank

Date of Discharge May 20th, 1919.

Appointment

Signed at Montreal, Quebec this 20th day of May 19 19

in Military District No. 4

File Reference No. MD4 19-A-149

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

- 1.—That discharge certificate must be carried when wearing uniform.
- 2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing, and
- 3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.

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

Date of Enlistment

March 17-16

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

Dec 1/16  
42 Jun 1st 17

A

RATE OF SEPARATION ALLOWANCE

20	25	30	1-9-18
----	----	----	--------

P. 6 275.3  
M 0 26813

RATE OF ASSIGNMENT

25			
----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 1078012  
 Rank ~~Cpl~~ Promoted Sgt Reverted Discharge  
 Soldier's Name G. H. Abbott  
 Battalion 5th O/S Pioneer Batta  
 Beneficiary Mrs Ellen Abbott  
 Relationship wife - M 7 W 2054 20/7/18  
 Address

PARTICULARS OF ASSIGNMENT

Name Mrs E. Abbott (Wife)  
 Address 327 - 1st Ave Verdun Que  
 Change of Address  
 1  
 2  
 3  
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Sept 30 -17		1149	238	687	Enlisted 17-3-16 as Pte. Pro. Sgt 24-5-16. Rev. Cpl. 1-6-17.
Oct	B 50041	25	37	62	No S/A to be paid in Oct 1917 to recover payments
Nov.	B 51846	25	25	50	from 1st June to 30th Oct Soldier was paid
Dec	B 57447	25	25	50	at Sgt's rate for these 4 months
Jan 18	B 63894	25	25	50	M 7 W 2054 Ret'd. 7/8/18. O.K. H.G.
Feb	B 90039	25	25	50	(M 0 57626)
Mar	G 97255	25	25	50	
Apr	G 7037	25	25	50	
May	A 9958	25	25	50	
June	B 12922	25	25	50	
July	A 24191	25	25	50	
AUG	A 28309	25	25	50	
SEP	A 34890	25	25	50	
OCT	A 41512	25	25	50	
NOV	A 49621	25	25	50	
DEC	A 62172	45	25	70	
JAN		30	25	55	
		844	625		

CANADIAN  
 ASSIGNED PAY AUDITED  
 P.C. Clerk to - 30-11-18  
 J. B. M. Clerk  
 AUDIT CLERK  
 DATE 17-5-19

M. F. W. 128.  
FORM 6-17-1772-39-1141  
L. L. 2320-M. & D. 1903.

Satap 31/12/18  
 M 7 W 2054 20/7/18  
 30/12/18  
 Holler





Rank **Sergeant** Date **of att. March 17th. 1916**  
Regimental Number **1078012** Date of Discharge **May 20th. 1919**  
Unit **5th. Pnr.**  
Name **ABBOTT George Herbert,**  
Address **327 - 1st. Ave. Verdun, MONTREAL QUE.**  
B.P.C. District Office **Montreal D.D. # 4**

Attestation Form:-

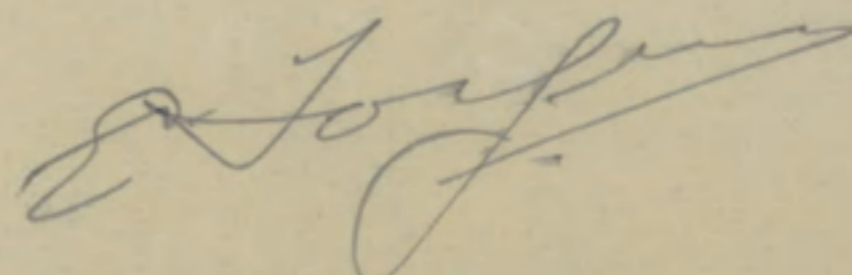
**Weight on enlistment:** 141 pounds  
**Marks of Identification:** Deformity of right hand, ring finger.  
**Rank at attestation:** Private

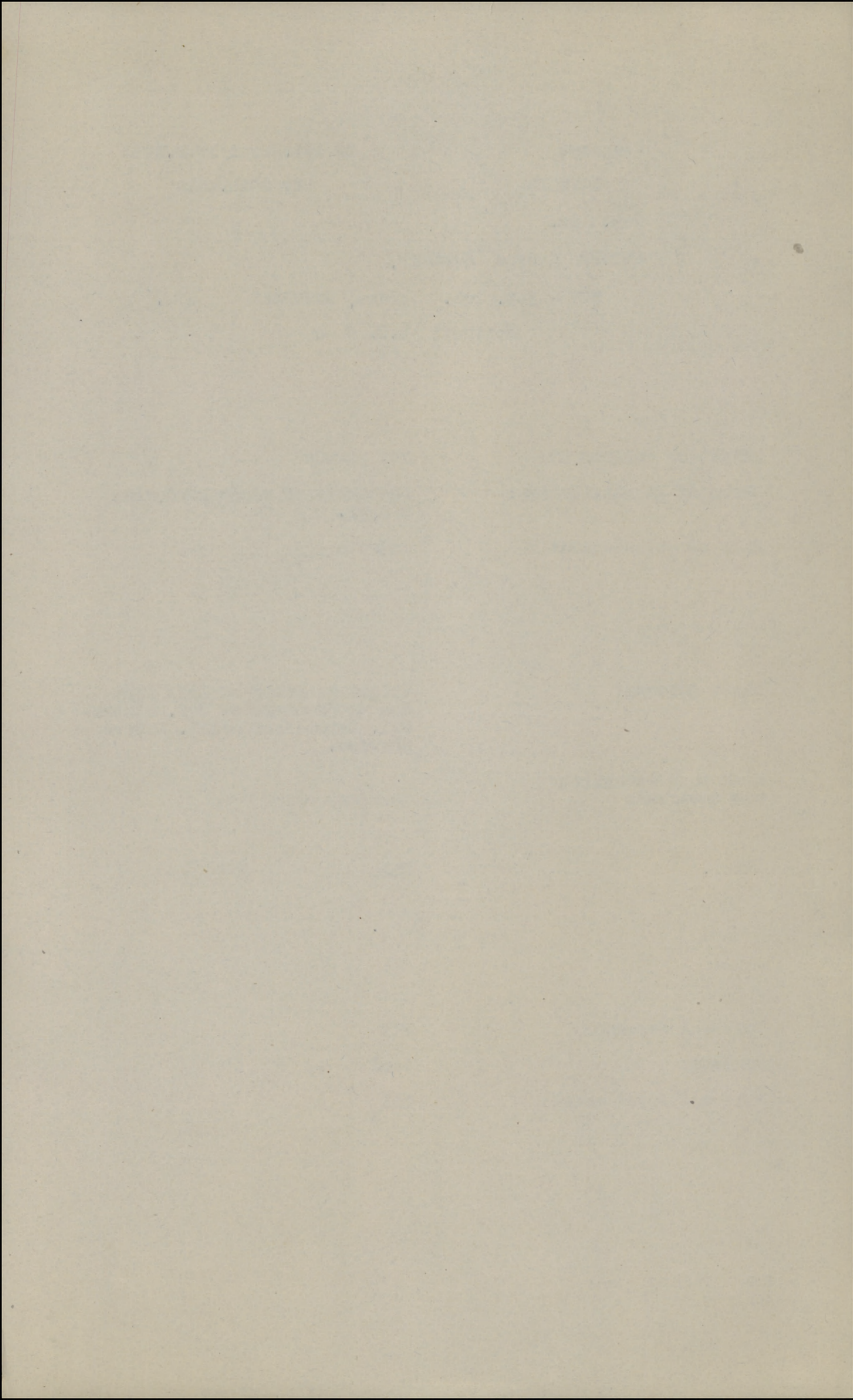
Casualty Form:-

**Minor defects:** Slight weakness of left foot due to fracture of 3rd. Metatarsal. Cause: Accidental. Active service.  
**Rank when disability was incurred:** Sergeant  
**Misc.:** Nil

Conduct:-

**Venereal Disease:** Nil  
**Conduct:** Good  
**Self inflicted wound:** Nil





PROCEEDINGS OF A MEDICAL BOARD.

Dated at EPSOM SEP 26 1917

No. 1048012 Rank SGT Name ABBOTT D.A. GH

Local Unit \_\_\_\_\_ Overseas Unit 5th C.P.T. Age 47

Examination held at M.C.H. EPSOM

DISABILITY.  
~~Overseas~~ Local  
(scratch one out).

Artero. Sclerosis

PRESENT CONDITION.

History (M.H.S) "Injury to Foot (accidental)"  
- Bomb Lodge 15-7-18 to 29-7-18 No other  
entry on M.H.S  
Subjective No complaints.  
Objective Looks to be stated age.  
Moderate artero sclerosis. Slight tachy-  
cardia (100 standing)  
Other systems - No apparent disease

BOARD RECOMMENDS:-

- 1. Fit for Duty.....
- 2. Fit for duty after.....weeks' physical training.
- 3. Fit for Temporary Base Duty B. Two - Temp D. one weeks.
- 4. Fit for Permanent Base Duty.....
- 5. Discharge .....

Signatures:-

Members { [Signature] ..... President.  
[Signature] .....  
[Signature] .....

APPROVED

Dated 24/9/18 1917 [Signature]  
For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD

Dated at London on 15th day of April 1917  
Name John Smith Rank Private  
Level Unit 1st Battalion Overseas Unit 1st Age 25

DISABILITY  
General Local

PRESSENT CONDITION

The patient is suffering from a severe case of influenza which has been complicated by pneumonia. He has been in hospital since the 1st of April and has not yet recovered. His temperature is high and he is unable to get up. He has a cough and expectorates a large quantity of sputum. His chest is dull to percussion and his breath sounds are diminished. His pulse is rapid and his respiration is shallow. He has lost weight and is very weak. He is unable to do any work at present.

BOARD RECOMMENDATIONS

1. Fit for duty after 2 weeks physical training
2. Fit for Temporary Base Duty 4 weeks
3. Fit for Permanent Base Duty 6 weeks
4. Discharge

Signature

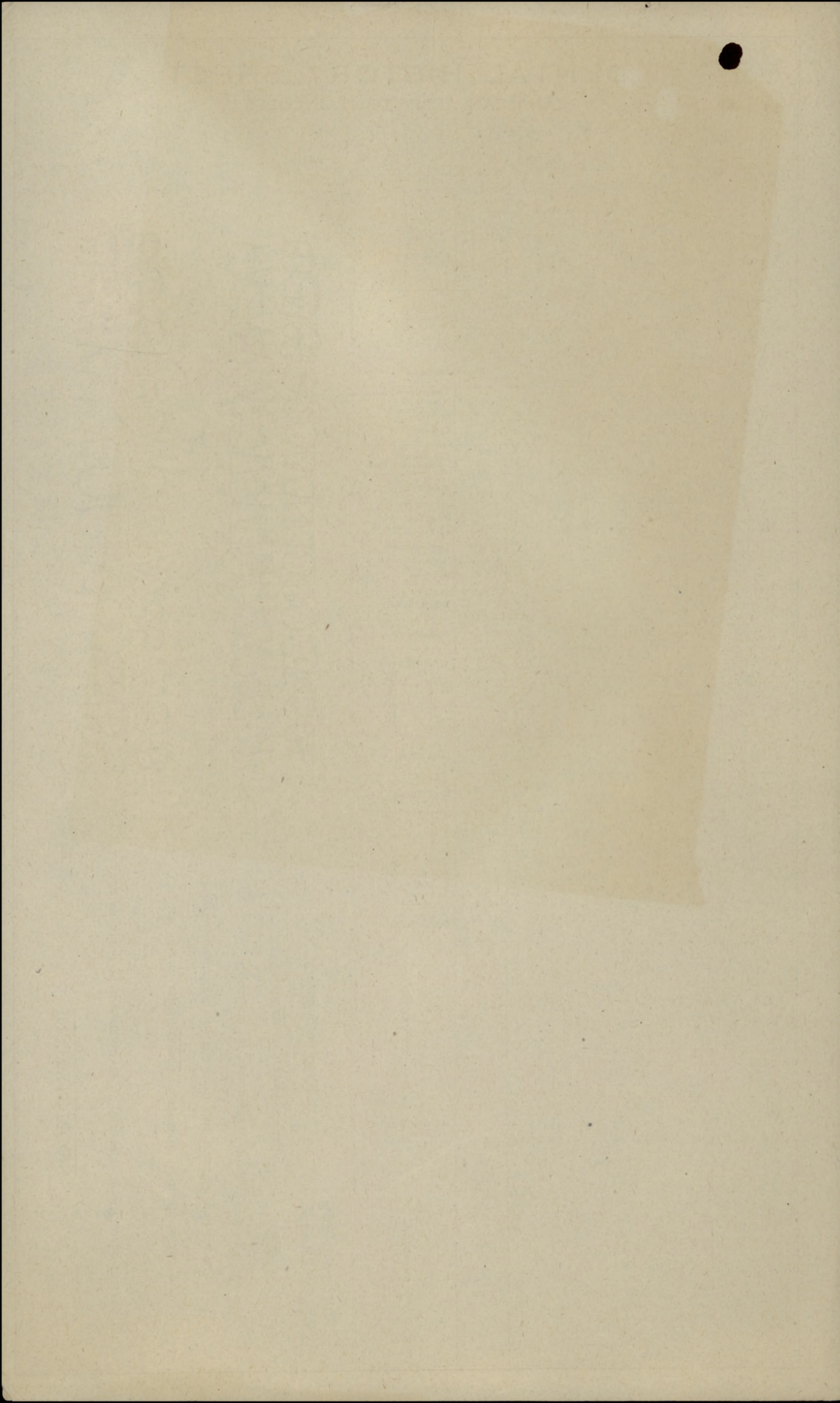
President

Members

APPROVED

1917





# ORIGINAL ORIGINAL

## MEDICAL HISTORY SHEET

Surname Abbott Christian Name Charles Herbert

Examined { on 17th day of March 1916  
 { at Montreal.

Approved by Alfred Endicott

Birthplace { City or Town St. Helens  
 { County Shropshire, Eng.

Rank Private M.O.

Apparent age 37 yrs. 11 mos.

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.
<u>B.T. 27-9-18</u>	<u>Unfit</u>	<u>Unfit</u> M.O.

Trade or occupation Bricklayer

Height 5 Feet 6 1/2 Inches.

Weight 141 Lbs.

Chest measurement { Minimum 34 inches.  
 { Maximum expansion 37 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right Left  
 { Number 3

Date.	Result.	VACCINATIONS.
<u>20/9/16</u>	<u>E.C.</u>	<u>Unfit</u> M.O.

When Vaccinated last As a child

(a) Marks indicating congenital peculiarities or previous disease Nil.

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>13/7/16</u>	<u>Unfit</u>	<u>Unfit</u> M.O.
<u>21/7/16</u>	<u>Unfit</u>	<u>Unfit</u> M.O.
<u>29/7/16</u>	<u>Unfit</u>	<u>Unfit</u> M.O.

(b) Slight defects but not sufficient to cause rejection  
Third right finger slight bent

Refer to Dental Corps

Enlisted on 17th day of March 1916 at Montreal Que.

Corps.	REG'T NUMBER.	HABITS.	DATE.
<u>5th O's Pioneer Batt. C.E.F.</u>	<u>1078012</u>		<u>17 March 1916</u>
<u>Can. Railway Const'n Corps</u>	<u>Trans 5th Bn C.R.T. 7/2/17</u>		<u>5th Feb. 1917</u>

### EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Epsom</u>	<u>25/9/18</u>	<u>Arterio Sclerosis</u>	<u>Unfit</u>
<u>Perth</u>	<u>2/12/18</u>	<u>Arterio Sclerosis</u>	<u>Unfit</u>
<u>Montreal</u>	<u>15-5-19</u>	<u>fit for service</u>	<u>Fit</u>

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

CANADIAN

c.

George Herbert

Christian Name

Shatt

Surname

STATION.	Date of Arrival at the Station.	DATES OF						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.
		Admission into Hospital.			Discharge from Hospital						
		Day	Month	Year	Day	Month	Year				
Coombe Lodge G. Warley		15	7	18	29	7	18	Inj. to foot L accidentar	14		W. L. ...
W. H. Eason		30	7	18	17	OCT	1918	Inj. to left instep fract 3rd metatarsal - Convol	40	On admission - Patient limp gain under bands of metal brace. 16.9.18 Improves as expective signs walks with distinct limp age 44 Opinion of Dr B re B-II. Temp PI	W. L. ... CAPT. O.A.M.C. "B" DIVISION.

all in



# 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.

- This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- 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.
- All questions, etc., must be answered.
- 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.
- Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

5th PIONEER  
BATTALION  
C. E. F.

- Name of Overseas Unit which Soldier joins.....
- Regimental Number *1078012*.....
- Full Name of Soldier *George Herbert Abbott*.....
- Place of Birth *St Helens, Lancashire, England*.....
- Are you married, or not? *Yes*.....
- If married, state,  
(a) Full name of your wife *Ellen Abbott*.....
- (b) Present Postal Address *327 First Avenue  
Verdon Quebec*.....
- Are you a widower? *No*.....
- Have you any children? *Yes*.....  
If so, give number of boys and girls *1 Boy 4 Girls*.....  
Also their names and ages.....  
*Ellen 14 years*  
*George 10 years*  
*Alice 9 years*  
*Betty 6 years*  
*Margaret 6 years*

DECLASSIFIED

(9) Is your Father alive? Yes

If so, state name and address George Abbott 45 Rylands Street

(10) Is your Mother alive? Yes Widlow Lane Wigan

If so, state name and address Ellen Abbott Lane England

home address

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

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

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

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

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

(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.

George Herbert Abbott  
Officer Commanding.

Date Sept 1st 1916

HR Lordly

Lieut. Colonel  
Officer Commanding  
5th Overseas Pioneer Battalion C.E.F.

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

To Whom *Mrs Ellen Abbott* By Whom Assigned *Abbott G. H.*  
 Address *327 - 1<sup>st</sup> Ave* Regtl. No. *1078012*  
*Verdun* Rank *Sgt.*  
*Montreal* Corps *5<sup>th</sup> C. R. T.*  
 Rate *\$ 30.00* *2ue*

SPECIAL REMITTANCE

*Sched 401,20.7.17*

**PAYMENTS**

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.		<i>A 17896</i>	<i>30</i>	<i>mailed. 21/8/17-</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				





MILITIA AND DEFENCE  
ASSIGNED PAY  
OVERSEAS CONTINGENTS

P. 16<sup>4</sup>/<sub>7</sub>  
to be

M. F. W. 12  
50m.—7-16  
H. Q. 1772-39-819

*mrs*  
To Whom E. Abbott  
Address 327 1<sup>st</sup> ave  
Verdun Ave

By Whom Assigned G. H. Abbott

Regtl. No. 1078012

Rank Sgt. ~~at pl~~ <sup>promoted</sup> Serjt ②

Corps 5<sup>th</sup> O/S. 13<sup>th</sup>

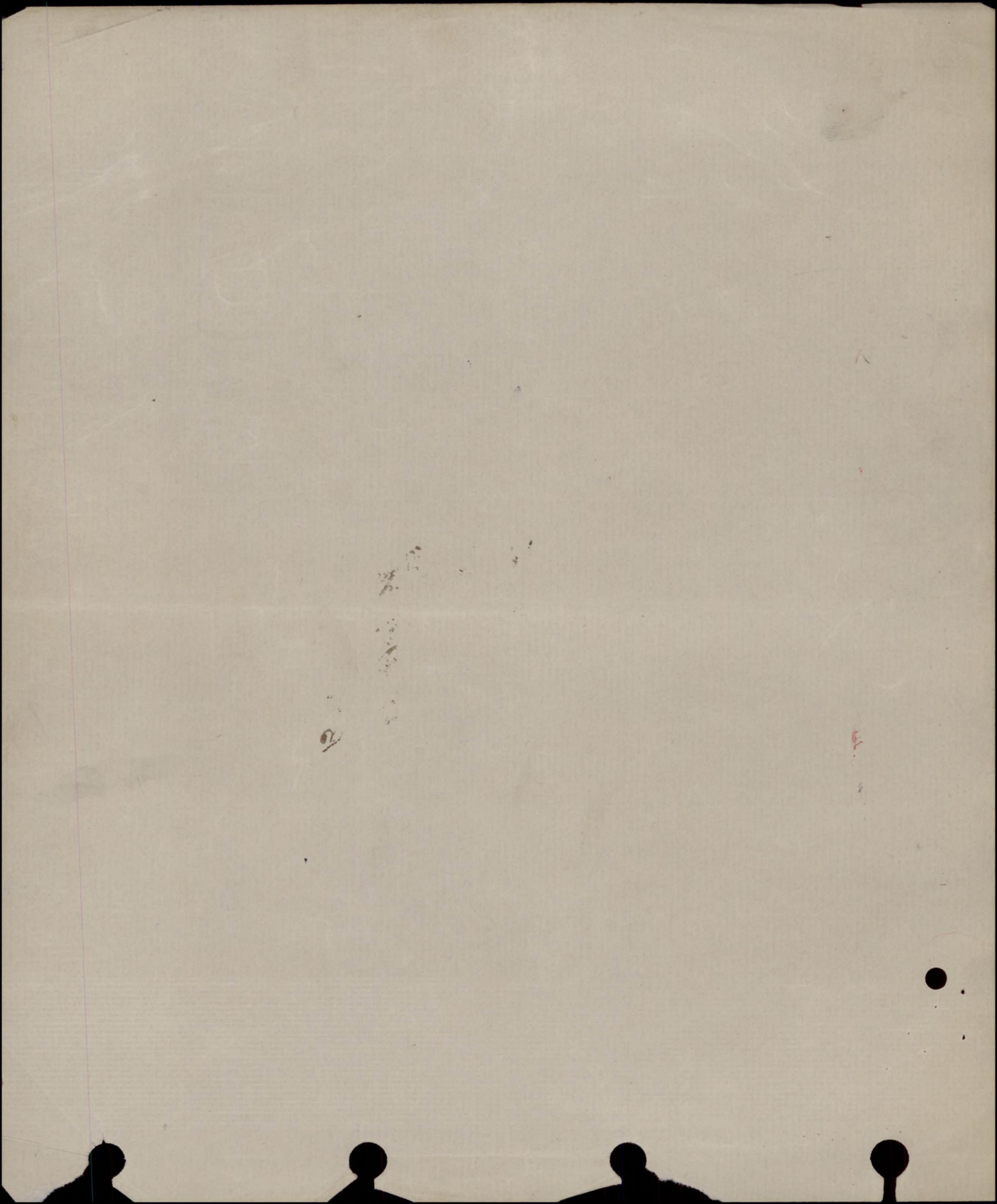
DEC 1 1916

Rate 25<sup>00</sup> Dec 1<sup>st</sup> /16  
① 22<sup>00</sup> June 1<sup>st</sup> /17  
② 25<sup>00</sup> 1<sup>st</sup> June 1917

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			① 2 M. 19 <sup>6</sup> / <sub>7</sub> <u>277</u> "Reverts in Rank"
Sept.				
Oct.				② 2 M 25 <sup>2</sup> / <sub>7</sub> - AM 25 <sup>2</sup> / <sub>7</sub> minute from Pay Master SCRT Aug <sup>30</sup> / <sub>17</sub> File No. 1078012 - Abbott G.H.
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				





MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.  
50m.-6-16.  
1772-39-819.

Sheet No. 2.

L. L. Job 4503. -Req. 6832.

*Mrs.*  
Ellen Abbott *Wife*

Sgt (3)  
Name of Soldier

1078012

*16 1/2*  
~~16~~  
Abbott G. H.

5 Par Bn

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>25<sup>00</sup> ✓ 22<sup>00</sup> June 1917. <del>25<sup>00</sup> 1 1918.</del></i>
April	1916			<i>25<sup>00</sup> ✓ 1<sup>st</sup> June 1917</i>
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.		<i>V 36265</i>	<i>25</i>	
Jan.	<i>W</i> 1917	<i>A 38292</i>	<i>25</i>	
Feb.		<i>A 43267</i>	<i>25</i>	<i>25 R</i>
March		<i>Q 49186</i>	<i>25</i>	<i>25 R</i>
April		<i>B 30</i>	<i>25</i>	<i>25 E ✓</i>
May		<i>B 6001</i>	<i>25</i>	
June		<i>B 13939</i>	<i>25</i>	<i>25 S</i>
July	<i>F 26240</i>	<i>B 21065</i> <i>B 21064</i>	<i>25</i>	<i>519<sup>00</sup> July to duty. B 21065 cancelled B 21064 cancelled.</i>
Aug.		<i>B 28198</i>	<i>22</i>	<i>22<sup>00</sup> In future.</i>
Sept.	<i>MC</i>	<i>X 33272</i>	<i>22</i>	<i>✓</i>
Oct.				<i>238<sup>00</sup> - 37<sup>00</sup> Oct. to adjust 25<sup>00</sup> future</i>
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

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.				



17-3-16

MILITIA AND DEFENCE

*Part  
Paid  
17*

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

SEPARATION ALLOWANCE

Name *Ellen Abbott*

Name of Soldier *Abbott Geo Herbert*

Address *227 1st av  
Verdun  
P.Q*

Regtl. No *1078012*

Rank ~~*Pte*~~ *Sgt 24/5/16* ~~*27/5/16*~~

Corps *5th Battalion* ~~*1-6-17*~~

Relation to Soldier }  
wife, child or mother } *wife*

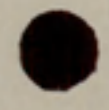
To what Corps belonging } *Sgt*  
when called out } *2 m. 1917*

PAYMENTS

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



Handwritten marks and numbers, possibly a signature or date, located in the center of the page.



MILITIA AND DEFENCE  
**SEPARATION ALLOWANCE**  
 OVERSEAS CONTINGENTS

*Paid  
Rate*

M. F. W. 11a.  
 50m.-4-16.  
 1772-39-318.

Sheet No. 2.

L. L. Job 310.-Req. 6574.

*Ellen Abbott*

*Wife*  
**PAYMENTS.**

Name of Soldier *Abbott Geo Herbert*

*Cpl. 1-6-17. ~~Sgt~~ Pte*

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May		<i>05231</i>	<i>49-</i>	<i>49 To adjust March capl etc</i>
June		<i>A1716</i>	<i>20</i>	<i>120 promoted Sgt 24/5/16 5% Underpaid</i>
July		<i>I9770</i>	<i>30</i>	<i>130 To adjust June etc</i>
Aug.		<i>A 10751</i>	<i>25</i>	<i>25</i>
Sept.		<i>A 14882</i>	<i>25</i>	<i>125</i>
Oct.		<i>A 18234</i>	<i>25</i>	<i>125</i>
Nov.		<i>A 21495</i>	<i>25</i>	<i>125</i>
Dec.		<i>A 24885</i>	<i>25</i>	<i>125</i>
Jan.	1917	<i>A 28440</i>	<i>25</i>	<i>25</i>
Feb.		<i>A. 31386</i>	<i>25</i>	<i>25</i>
March		<i>A 34590</i>	<i>25</i>	<i>25</i>
April		<i>B 16</i>	<i>25</i>	<i>25</i>
May		<i>B 3472</i>	<i>25</i>	<i>25</i>
June		<i>C 7041</i>	<i>25</i>	<i>25</i>
July		<i>B 11353</i>	<i>25</i>	<i>25</i>
Aug.		<i>del 3686</i>	<i>25</i>	<i>25</i>
Sept.		<i>C 17149</i>	<i>25</i>	<i>25</i>
Oct.				<i>449<sup>00</sup> ✓</i>
Nov.				<i>no check To adj payment from May to Sept.</i>
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.				

AGR

Rank *Asst* Name ABBOTT, George Herbert  
 Unit 5th Pioneer Bn. If in perm. Corps, }  
 What Unit? }

Reg'l No. 1078012  
 Married or Single Married

Place and Date of Enlistment Montreal, P.Q. 17th March, 1916. Place of Birth St. Helens,  
 Lancashire, Eng.  
 Name and Address, Next-of-Kin Ellen Abbott,

327 1st Ave., Verdun, P.Q., Canada. Relationship Wife.  
 Assigned Pay Monthly \$ Payable to

Separation Allowance \$ Payable to

Relationship  
 Relationship  
 Relationship  
~~N/E. R.B. No. 1750  
 File R.L.  
 Category M.U. Can~~

Discharge, Date and Place Reason Character

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	Character
Date.	From whom received.				
<b>ARRIVED in ENGLAND*SS*METAGAMA DEC, 6, 1916</b>					
7/12/16	5 <sup>th</sup> Pns. Asst Asst Sgt.		Bramshott	27/11/16	P.I. D.O. 242
5/2/17	do	S.O.S. to C.R. Con Depot	Bishott	5/2/17	P.I. D.O. # 26.
6/2/17	Depot.	205 from 5 <sup>th</sup> Pns.	Purfleet	6/2/17	P.I. D.O. # 26.
6/2/17	"	S.O.S. to 5 <sup>th</sup> Bn. C.R.I.	do	7/2/17	P.I. D.O. # 26.
4-2-14.	"	Reverts to ranks. own request	"	8-2-14	— 27
7-2-17	5 <sup>th</sup> C.R.I.	<b>Taken on strength.</b>	do	7-2-17	— 4
14-2-17	"	To Lt Lt/Cpl.	"	6-2-17	—
30-4-17.	"	Landed in France	"	24-2-17	P.I. D.O. 36.

N/E. R.B. No. 4215  
 REMARKS  
 Taken from Official Documents.  
 O R CAN  
 Category...

H.F.B. 103 CHECKED  
 2 APR 1917

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.				
17.8.17	5 <sup>th</sup> Lt. D.	Promoted Sergeant.	Field	15.8.17	Pt. No. 78.
<del>19.12.17</del>	<del>Dep. C.R.S.</del>	<del>Invalided from Canada</del>	<del>do</del>	<del>16.12.17</del>	<del>C.L.C. 87, Entered in Casual.</del>
22.7.18.	5 <sup>th</sup> Lt. D.	Inv Inj accid. postulat. C.R.S.D.	Sgt. Field.	15.7.18.	pt II 69. C.R.S.D. pt II 205. 26/7/18.
10.10.18.	C.R.S.D.	on form. 3 <sup>rd</sup> C.C.D.	" Gunplat.	7.10.18	pt II 281. 3 <sup>rd</sup> C.C.D. pt II 240. 11/10/18
27.11.18	"	ceases on form. 3 <sup>rd</sup> C.C.D.	" "	27.11.18	pt II 329. 3 <sup>rd</sup> C.C.D. pt II 280. 27/11/18
12.12.18	"	Sos on leave from 6 <sup>th</sup> Lt. to the C.E.F. in Canada	"	12.12.18	pt II 314



Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
10-10-18	C R J D	On board 3 <sup>rd</sup> Seafood	Perflut	7-10-18	Pt # 281
27-11-18	Do	Off board at Seafood	Do	27-11-18	Pt # 329
S.O.S, C.R.T,D ON EMBARKING TO CANADA 12, DEC, /18			<i>[Signature]</i>		Idemt.
			for O.C. Canadian Railway Troops Depot.		
22-5-19.	SOS. Disch. Med. Unfit RO.1420		Montreal.	20-5-19.	DD4/DO/Pt.11/142
		<i>[Signature]</i>			
		Captain, Officer i/c Discharge Section, District Depot No. 4.			





CERTIFIED CORRECT.  
 CAN. RECORDS, LONDON.  
 15 APR 1917

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				
7/2/17	Depot C.R.Y.	Reverts to ranks, own request	Purfleet	6/2/17	pt. 1/0.27
14/2/17	5th C.R.Y.	To be a/cpl.	do	6/2/17	" " " 11
<i>D. M. Worthehouse</i> LIEUT.					
20.5.17	do	Landed in France <u>Promoted Sergeant</u>		FOR LT. COL. I/C RECORDS 24.2/17 L.R. 7641. Part II Ord 36 d-30/4/17	
16.2.18	Do.	Granted Leave to UK. 14 2/18 to		15.3.17	B213 Pau II 078
2.3.18	Do	Rejoined unit	Field.	28 7/18	Do Pt 1-0.12 d. 17-8-17
2.7.18	12 C.R.Y.	St. Inj. Abot. L. accid. adm		1.3.18	Do
		72 C.R.Y.		30.6.18	
		To 4 C.R.Y.		2.7.18	G/14
30.6.18	Do.	Do adm 12 C.R.Y.		30.6.18	G/347
6.7.18	55 Genl	2 C.R.Y. Lt Foot adm 55 Genl		6.7.18	G/551
Do	4 C.R.Y.	Inj. to L. Foot adm 4 C.R.Y.		7.7.18	G/1280
		To B. 7		5.7.18	
9.7.18	adg.	Reported Inj. accidentally		29.6.18	W/W 3428 KD 18/14831
15.7.18	55 Genl	Invalided "Inj. accid" per A. 2. St. Denis" and posted to C.R.Y. Depot Purfleet.		15.7.18	A 2 7/3083, A. 9. 5650 Pt 1-0.69 d. 22.7.18

*G. H. O.*  
 Lieut. for Lt.-Col., A. A. G.  
 Canadian Section, G. H. O. 3rd Echelon, B. E. F.

**MEMORANDUM.**

JUNE 29<sup>th</sup> 1918.

From

Statement re accident to

To

No. 1078012 Sgt Abbott G. H.

At 4 p.m. 29/6/18 while derauling a small track-car loaded with material the car suddenly tipped and a barrel of spikes (about 150 lbs) dropped on my foot rendering me unable to walk.

G. H. Abbott Sgt.  
No 1078012

The above statement is certified correct

Thomas F. Cpl  
No 477916

W. Webster R. Cpl.  
No 153093

*1078012*  
*1078012*



SURNAME CHRISTIAN NAME OR NAMES REG. No.

ABBOTT. G.H. 1078012.

RANK UNIT Co. TROOP BATTY.

Sgt. C.R.T. 5.

HOSPITAL DATE OF ADMISSION  
12. C.F. A mb. 30-6-18.

55 G. H. Boulogne

6-7-18

1. *Gen med H Colchester* HOSP. 15-7-18

2. *Gen. C. Woodcote H. Open.* HOSP. 30-7-18

3. HOSP.

4. HOSP.

DIAGNOSIS I.C.T. L. Foot. a

1. *Fract. P. Foot Acc. H*

2. *Frac. 3rd. Metatarsal. Lt. Ray*

3.

DISPOSITION *Dis. 7.10.18* DATE

C.L. 6-7-18. A258.

REMARKS

12-7-18 A263 (3)

23-7-18 B272

30-7-18 B/278-1. re B/272. Dia: ch'gd to: "Fract P. Foot Acc."

2-8-18 B281 (2)

8-8-18 B286 (2). Note: Re. Ch. B. 281. Diag. changed to Fract. 3rd. Metatarsal Lt.

10-10-18 B341

A.M.D. 2 DEPT.

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

# EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.

\*Name..... ABBOTT, George Herbert ..... Rank..... Sgt? ..... Regtl. No..... 1078012.

Original unit..... 5th Cr ..... Present unit..... D.D. 4 ..... M. or  S. Age..... 31 Religion..... C. of E. Fyle Depot..... 19-A-149 Ref. H.Q.....

Port, ship, and date of arrival..... St. John N.B. S.S. Corsican..... 25-12-18.

Next of kin..... (W) Mrs. Ellen Abbott. As below.

Address on leave..... 327 1st Ave. Verdun, Montreal

Address on discharge..... As above

Transportation issued Yes No Date..... Character on discharge.....

Previous occupation..... Foreman Bricklayer Date and place of enlistment..... Montreal, 17-3-16.

Diagnosis..... Date of Medical Boards.....

Date.	Remarks	Pt. 2 Order No.
30-12-18.	T.O.S. from O/S. 15-12-18. Posted to Cas. Coy. 26-12-18.	
	Furlough W/S. to 9-1-19.	256.

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

Date.

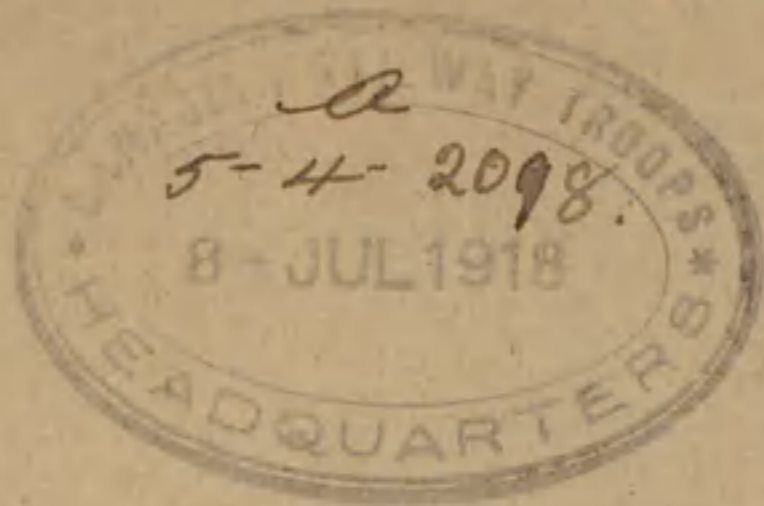
Remarks.

Pt. 2 Order No.

22-1-19. Granted subsistence from 9-1-19. 22 Page 8

22-5-19. SOS. Dis. H. M. Service. 20-5-19. Med. Unfit. Auth. RO. 1420. 142 p.





ORDERLY ROOM  
No. 53672/15  
6 JUL 1918  
5TH BATTN.  
CAN. RLY. TROOPS.

D.A.A.G.,  
FIFTH ARMY.  
A.F. W. 3428  
9/7/18

# Report on Accidental or Self-Inflicted Injuries.

To be rendered in accordance with instructions on the back of this Form.

1. Number, Rank, Name and Unit of injured man. 1078012 Sgt. Abbott, G.H.  
*5th Batt. Can. Rly. Troops* Date of Casualty. 29-6-18.

2. Nature, Location, and Severity of injury. (N.B.—Field Ambulance to be notified at once if wound is believed to be self-inflicted.)  
*Inj Foot Lh Not serious*  
*(striking of track car)*  
*for O.C. NO. 12 CANADIAN FIELD AMBULANCE.*

3. Short statement of the circumstances of the case. (Signed statements of witnesses to be attached to this form.)  
On the afternoon of 29-6-18 a small track-car containing material was being derailed when it suddenly tipped over and a barrell of spikes, weighing about 150 Lbs. fell on Sgt. Abbott's foot causing injuries as stated above.  
He was admitted to 12 Cdn.F.A. 30-6-18.  
Statement of witnesses attached.

4. Commanding officer's opinion as to whether the man was :—  
(a) In the performance of military duty. yes  
(b) To blame. no  
(c) Whether any other person was to blame. no

Date 1-7-18. Commanding *G. Wayhan Capt*  
5th Bn. Cdn. Rly Troops.

5. (a) Opinion of G.O.C. Brigade. *As above.*  
(b) Disciplinary action taken or proposed, whether against injured man or another. *None.*

Date 8/7/18 Commanding *G.O.* Brigade. *Corps Can. Rly Troops*

6. To *5th* Army "A." Forwarded with reference to my Casualty Wire No. *1518* dated *8/7/18*

Date 8/7/18 ADJUTANT GENERAL'S BRANCH, G.H.Q., 3RD ECHELON. CENTRAL REGISTRY. *Div. 500. Corps Can. Rly Troops*

7. To D.A.G., G.H.Q., 3rd Echelon. 11 JUL 1918 Forwarded for record. This casualty should be reported as *Injured, Accidental*

Date 9. 7. 18 Commanding *18714831* Army. *for O.C. NO. 12 CANADIAN FIELD AMBULANCE.*

## INSTRUCTIONS.

1. These forms are to be completed in all cases of accidental or self-inflicted injuries, involving a soldier's absence from duty, whether due to the man's own act, or that of a comrade, or to other extraneous circumstances.

2. Where several casualties occur as the result of one accident, one form is to be completed for each Officer or other rank injured, but only one set of statements from the witnesses of the accident need be attached.

3. Full statements are to be taken by an Officer from the witnesses of the accident. These statements will be signed by the witnesses making them, and by the Officer who takes them, and will be forwarded with this Form. Where it is intended to take disciplinary action, copies of these statements should be retained by the Unit for use in lieu of a summary of evidence.

4. Where it is possible to obtain it, a statement from the injured man will also be forwarded. This, however, should not be used as evidence against him in any subsequent disciplinary proceedings.

### Special Instructions as to Evidence in Cases of Self-Inflicted Wounds.

5. In these cases the statements mentioned in paragraphs 2 and 3 above should bring out all material points, *e.g.*, statements to the effect that the witness was with the accused standing on the fire step (or sitting in a dug-out); that the accused was cleaning his rifle; position of safety catch, magazine, etc., if known; muzzle of rifle on toe of foot; hand on muzzle; that accused pulled trigger; that the rifle was afterwards examined and an empty cartridge case was found in chamber; that accused was seen to be wounded; what accused said ("I have shot myself," "I did not know it was loaded," etc.).

6. A soldier is specially trained in the safe use of his rifle and revolver, and evidence of any neglect of the ordinary precautions as to their handling in such cases usually has considerable bearing on the question of negligence. In cases of wilful self-wounding the fullest possible evidence should be obtained; unless the evidence is conclusive this charge should not be used. The charge will therefore usually be laid under Sec. 40 Army Act—"Conduct to the prejudice of good order and military discipline in wounding himself through negligently handling a rifle," and an alternative charge to this effect should be made, even if the accused is to be tried under Section 18 for wilful maiming.

Roll No. *B. Page 2827*

Latest Address, *327-1st Ave  
New York, N.Y.*

Remarks, .....

Date of Service, *24-2-17*

Unit, *Can. Div. Theatre of War, France*

Christian Name, *Ben Herbert*

Surname, *A B BOTT*

Number, *10 28012*

Rank, *Sgt*

*V*

*B*

*hp*

4. 15417 Wier

APR 27 1871

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A258.	12 Can. Fld. Amb.	30-6-18	I. C. T. L. foot
A263	55 Gen. Boudoeyne	6-7-18	" " " "
B272	Gen. Mil; Colchester	15-7-18.	Fract. " " " " acc " " " " " " B 278
B281	Mil. Gen. Epsom	30-7-18	" " " " " " B 286 Fract. 3rd Metatarsal Lt.
B341.	Drisco	7-10-18	" " " "

NAME *Abbott. G. W.*

REGT'L No. *1078012*  
H. Q. FILE NO. 649.

RANK AND CORPS *Pt 5th*

FOLLOWS  
No.  
FOLLOWS

CABLE

NO.

DATE

NATURE OF CASUALTY

GEORGE.

HERBERT.

NE

Name **Abbott**

Rank

**Sgt.**Reg. No. **1078012**Unit **5<sup>th</sup> C.P.T.****E. Abbott.**

Next of Kin

**327 - 1<sup>st</sup> AVE. VERDUN. PA.**

8

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
30-10	126 <sup>th</sup> Ave	St. J. St. Paul				32641
6-7	55 <sup>th</sup> E. St. Paul	Do		13263		2470/13
19-7	5 <sup>th</sup> C.P.T.	Do		B		2473
	Report should read					3
	Trac. Foot Acc			13278		2455
30-7	M. Con. Trp. Trp.			13287		25174
	Report (Trac. Trp.)			13286		
	Trac. 3 <sup>rd</sup> Met. Trp.					
7.10.18	Discharged		Do	B311		8530
7.10.18	Will proceed on 11/10/18 to 3 <sup>rd</sup> C.P.T. Seaford					1090





SURNAME.

Abbott.

CHRISTIAN NAMES

George, Herbert.

REGL. No.

1078012

RANK

Pioneer Sgt.

UNIT

5th pioneer.

Batt.

FORMER CORPS

nil.

4 CARD NO. <sup>0.13</sup> <sub>xv</sub>

Soldier's R.C. 20/5/19

FOLL. DO. 142 of 22-5-19

408

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Abbott, Mrs. Ellen.

RELATIONSHIP TO SOLDIER

wife.

ADDRESS

327-1st. Ave., Verdun, P.Q.

COUNTRY OF BIRTH

England, St. Helens.

DATE

July 29th. 1878

PLACE OF ATTESTATION

Montreal, P.Q.

DATE

Mar. 17th. 1916.

Sailed SS. Metagama. 27/11/16.

9/6 25-12-18 245

MARRIED

Yes.

SINGLE

WIDOWER

TRADE OR CALLING

Fireman Bricklayer

RELIGION

Church of Eng.

DESCRIPTION.

APPARENT AGE

37 YEARS

8 MONTHS

HEIGHT

5 FEET

6  $\frac{1}{2}$  INCHES

CHEST MEASUREMENT

37 INCHES

EXPANSION

3 INCHES

COMPLEXION

Fresh

EYES

Blue

HAIR

Grey.

DISTINGUISHING MARKS

Third right finger slightly bent.

MEDICAL EXAMINATION.

PLACE

Montreal.

DATE

Mar. 17th. 1916.

Present Add. 327. 1st Ave. Verdun P.Q.

No. 104812 ? RANK *Pvt*

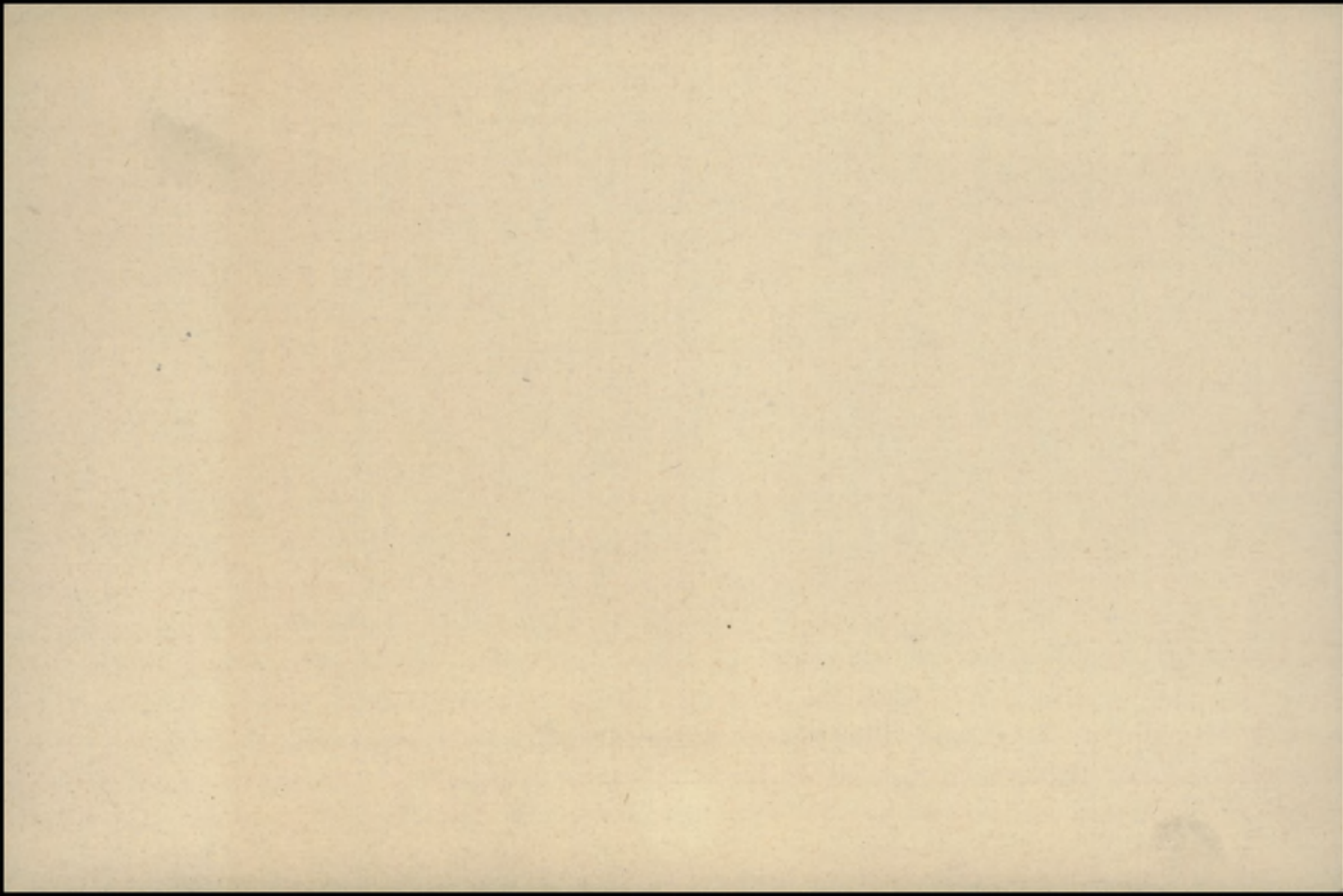
NAME *Abbott G.* *H*

T. O. S. 17-3-16  
 D. O. 2 of 17-3-16

UNIT *5th Pioneer Battalion C. E. F.*

M. D. 4

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916</i>	<i>1916</i>			
<i>Mar 17</i>	<i>Mar 31</i>	<i>✓</i>		
<i>April</i>		<i>✓</i>		
<i>May</i>		<i>✓</i>	<i>Prom. Prov. corp. 6-5-16</i>	<i>D. O. 44. 6-5-16.</i>
<i>June</i>		<i>✓</i>	<i>" sergt 24-5-16</i>	<i>D. O. 60. 24-5-16.</i>
<i>July</i>		<i>✓</i>		
<i>Aug</i>		<i>✓</i>		
<i>Sept</i>		<i>✓</i>		
<i>Oct</i>		<i>✓</i>		
<i>Nov</i>		<i>✓</i>		



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.

Concur.

19. Is the invalid fit for

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

20. It is certified that the invalid

(a) Does require treatment: (Give the nature of the condition and of the treatment required and its probable duration.)

- (b) Does not require treatment.  
 (c) Should pass under his own control.  
 (d) Should not pass under his own control.  
 (Strike out condition not applicable.)

21. It is recommended that the invalid be discharged. (When not for discharge add special recommendation.)

Fit for service in Canada only

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 Montreal, P.Q.M.D.#4.

DATE May 15th, 1919.

*George Herbert Abbott* President.  
*John MacLennan* 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 \_\_\_\_\_ Members

DATE \_\_\_\_\_

APPROVED BY *John MacLennan* APPROVED BY *George Herbert Abbott*  
 for Assistant Director of Medical Services. Director-General of Medical Services.

DATE May 15th, 1919. DATE \_\_\_\_\_

THIS FORM WILL BE USED FOR ALL RANKS  
 MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

- 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.
- 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."
- 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.
- Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
- If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
- A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
- Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
- 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 Montreal P.Q.M.D.#4. DATE May 15, 1919.

1. 1 (a) Unit D.D. No. 4. (b) Regimental No. 1078012 (c) Rank Sgt.  
 (d) Surname ABBOTT. (e) Christian name GEORGE HERBERT  
 (f) Home address 327 1st Avenue, Verdun, P.Q.  
 (g) Next of Kin Mrs. Helen Abbott (h) Relationship Wife  
 (i) Address of Next of Kin Same as above
2. Age last birthday 47 Date of birth July 29, 1871
3. Enlistment, or Appointment (if an Officer) (a) Place Montreal, P.Q. (b) Date Mar. 17/16
4. Personal description:  
 (a) Height 5-6 1/2 (b) Weight 163 (c) Complexion Medium  
 (d) Colour of hair Grey (e) Colour of eyes Grey (f) Identification marks, Scars, etc. Deformity right hand, ring finger.  
 Foreman of construction.
5. Former trade or occupation Foreman of construction.

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
3 2/12	

	PERIODS	
	From	To
Canada	17-3-16 26-12-18	6-12-16
England	6-12-16 15-7-18	24-2-17 26-12-18.
France or other theatres of War	24-2-17	15-7-18.

7. Original disease, or injury Fracture 3rd Metatarsal (Left foot)
- (a) Date of origin June 28, 1918 (b) Place of origin France.  
 (c) Cause Keg of spikes fell on foot while on duty.

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.)

Slight weakness of left foot with pain after walking more than one mile. Constant limp.

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.)

There is some thickening at base of 3rd metatarsal bone left foot apparently due to old fracture. Somewhat tender. Complains a great deal of pain at base of metatarsals. All movements at ankle normal. Limp on walking. Can only walk about one mile with ease after which foot becomes painful and somewhat swollen. Arches of foot normal but somewhat tender on deep pressure. There is no apparent atrophy of muscles of leg. Can rise on toes but when weight is put on ball of left foot it causes pain. On double squatting can only come within one foot of heels.

(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
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).)

Keg of spikes fell on left foot on June 28, 1918, causing fracture 3rd metatarsal. In hospital 3-4 weeks.

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).)

Nil.

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

See Sec. 9.

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

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

N.A.

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

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.)

Rest. Remedial gymnastics.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? No.

(If the answer is "yes" state nature of treatment required and probable duration)

16. Can the former trade or occupation be resumed? Yes, with impaired efficiency.

(If not, briefly state why)

17. Recommendations. Fit for service in Canada.

Handwritten signature of Medical Officer

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, Sergt. 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.

Handwritten signature of invalid

S. A. Abbott, Sgt. Rank. Signature of invalid examined.

Statement of the Soldier

(This is to be completed only in the case of the Soldier taking his Discharge in England.)

I, the undersigned, 1078012 ABBOTT G. H. have heard the description of my disability read, and am satisfied (or not satisfied) with it.

Signature of Soldier examined: G. H. Abbott

Instructions to Medical Officers

Question 1.—State the disability in terms of a diagnosis, that is, a diagnosis of the existing condition as distinguished from the disease or injury which caused it.

Question 2.—The cause of the disability when known should be stated and care should be taken to establish as correctly as possible the place and date of origin.

Questions 3 and 4.—NOTE.—By Active Service is meant Service with the Colours in Canada, the United Kingdom or elsewhere during the present war, (since the 4th August, 1914.)

Question 5.—MEDICAL HISTORY.—State concisely the essential points of the history of the case as supported by documentary evidence.

Extracts should be made from all entries on the Medical History Sheet. If answers to Nos. 2, 3 or 4 show that the Soldier is suffering from some condition which pre-existed enlistment, it is advisable that these answers be substantiated as far as possible by statements obtained from the Soldier showing history of previous illness or injury.

Question 6.—PRESENT CONDITION.—As this question is primarily intended for the Medical Officer's report, in answering show clearly the condition of the Soldier at the time of examination.

It is directed that the objective and subjective matter be arranged in separate groups. The objective matter is considered to be the more important, in that it consists of a statement of the Medical Officer's actual finding.

Specialists' reports bearing on the PRESENT CONDITION should be attached. In addition to description of the disability, a report on "all systems" is required in order that the whole when completed may be a true pen portrait of the Soldier's condition.

The Medical Officer in charge of the case will fill out pages 1 and 2 of this Form. The original must be wholly in the handwriting of the Medical Officer.

Finally the O. C. Hospital or S. M. O. or an Officer delegated for such duty by the A. D. M. S., is required to sign a certificate at the bottom of page 2, which reads as follows:—

"I have satisfied myself of the general accuracy of this report and concur therewith, except....."

This is a most important part of the paper and one to which the attention of the Officers concerned should be frequently drawn as it is by such strict supervision that the accuracy and good results of Medical Board work can be assured.

ENTRIES OF RECATEGORY

Table with columns: Date, Station, Category, Signature of M. O., Date, Station, Category, Signature of M. O.

Reserved for M.H.C. MEDICAL HISTORY

Regt. No. 1078012 Rank SGT Surname ABBOTT Christian Name GEORGE HERBERT

Unit or Corps—(a) Overseas from United Kingdom 5<sup>th</sup> BATT (b) in United Kingdom CRTD

Born at—Town ST HELENS County or Province LANCASHIRE Country ENGLAND

Date of Birth—Day 29 Month JULY Year 1871 Age 47 yrs 4 months

Joined at MONTREAL Date 17 March 1916

Former trade or occupation GENERAL FOREMAN

Permanent Marks or any peculiarity that will serve for future identification:—

Deformed 3rd Finger R Hand

Height—feet 5 inches 6 1/2 Colour of eyes Grey

Signature of Soldier (for identification purposes) G. H. Abbott

Medical Report

Read carefully the instructions on last page of this form.

Table for Disabilities Group (a) ARTERIO-SCLEROSIS, Group (b) FRACTURE, 2nd Metatarsal, Left Foot, Group (c)

2. CAUSE OF DISABILITY

Table with columns: (i) As to Group (a) above, (ii) As to Group (b) above, (iii) As to Group (c) above, Place of origin, Date of origin

3. Is the disability due to disease contracted or injuries received prior to Active Service?

(i) As to Group (a) above? YES If yes, has Active Service aggravated it? YES
(ii) As to Group (b) above? NO If yes, has Active Service aggravated it?
(iii) As to Group (c) above? If yes, has Active Service aggravated it?

4. Is the disability due to disease contracted or injuries received while on Active Service?

(i) As to Group (a) above? NO
(ii) As to Group (b) above? YES
(iii) As to Group (c) above?

5. MEDICAL HISTORY.

Is a building foreman in civil life. Joined Army March 1916. Has had no serious illness prior to 1916. Since entered service sustained an accidental injury to left foot resulting in fracture to 7th metatarsal of left foot in France in June 1918. Caused by heavy weight falling on foot. He was in hospital for his injury 70 days. States that he is unable to do much walking. Has no other important illness in France. Boarded ship on 25.9.18. B.I.

6. PRESENT CONDITION.

There is no malunion or external evidence of fracture of foot but is stated on M.H.S. He complains of soreness & pain at site of injury when he does much walking. His foot swells at times - no oedema seen at this examination. He is 47 years of age. There is some arterial thickening - some roughening of cardiac sounds, without increase of dulness or acceleration of aortic 2nd sound. Appearance is about as age stated. Respiratory & all other systems normal.

7. OPERATION. (i.) Was one performed?

NA (ii) If so, state what.

(iii.) Was one advised and declined?

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto, unless there is evidence to the contrary.

8. (i.) Is there loss or decay of teeth attributable to Active Service?

NO

(ii.) If so, describe.

9. DO YOU RECOMMEND:—

(a) Fit for duty? (state category)

B II

(b) Invalid to Canada?

(c) Discharge from the Service as permanently unfit?

Date of Report

2/12/18

191...

Signed

M. H. Campbell  
Officer in medical charge of case.

Station

Purfleet

I have satisfied myself of the general accuracy of the above Report,

and concur therein except

(Officer if Hospital) Strike out one (S.M.O. Brigade) of these

Dated at

Station, on

191...

\*Delete if inapplicable.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

10. Is the disability fully described in Part I. (1)? If not, describe it.

Yes

11. Is the cause of the disability fully described in Part I. (2)? If not, describe it.

Yes

12. From the medical information now adduced, was the disability caused or aggravated by:—

(a) Negligence of the Soldier { Caused? Aggravated? }

(b) Misconduct of the Soldier { Caused? Aggravated? }

13. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour? (Estimate at none, 5%, 10%, 15%, 20%, etc.)

Twenty five percent

14. THE DISABILITY DUE TO SERVICE.—(See Part I. (3).) Aggravation on Active Service of a disability existing previous to joining is to be included in this estimate.

What part of the entire disability estimated next above (13) is due to causes arising during Active Service? (Estimate at none, 1/10, 2/10, 3/10, etc., or all.)

four tenths Twenty five percent of Donnell

15. Permanency of the Disability due to Service estimated next above in (14).

(i.) Is it permanent? NO

(ii.) If not permanent, what is its probable minimum duration (in months)?

Six months

16. If an operation was advised and declined, do you consider the refusal to have been unreasonable?

NO

17. Can the former trade or occupation be resumed?

Not applicable. Yes.

18. REMARKS:—

The foot injury is minor his chief disability is his eye aggravated by active service.

Authority A.P.S. 4083 11.11.18

19. RECOMMENDATION:—

(a) Fit for duty? (state category)

B two

(b) Invalid to Canada?

NO

(c) Discharge from Service as permanently unfit?

NO

Date of Board

Purfleet, Essex  
Dec 2/18.

Signatures of the Board

J. J. Donnell Major President.  
W. Macdonell Lt Col

Station

Approved

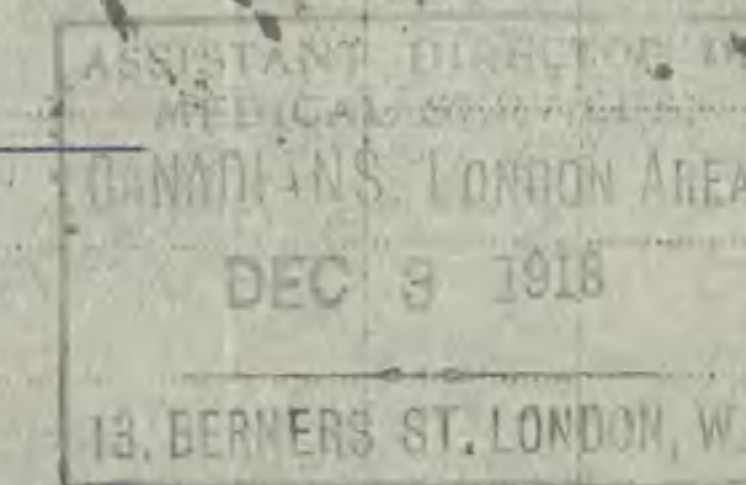
A. D. M. S. Major, O. A. V. G.

A.D.M.S.

Dated at

for A.D.M.S., Canadians, London Area

Station





## List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263	Attestation Paper	Militia Form W. 23
Squadron Battery Company	Conduct Sheet, " B. 263a	or Particulars of Recruit	" W. 133
or Field Conduct Sheet		Proceedings on Discharge	" B. 218
Copies of Convictions, by C. P.	in MS.	In the case of recruits who are rejected on final approval, the discharge documents will consist of	
Med. Hist. Sheet,	Militia form B. 313		
Casualty Form	" W. 54	(a) Proceedings on Discharge.	
Medical Report for Invalid§	" B. 227	(b) Attestation.	
Dental History Sheet	" B. 465	(c) Medical History Sheet.	
Last Pay Certificate	" W. 44		
Duplicate Discharge Certificate	" W. 39A		
‡Form of Will	" W. 82		
§Only if discharged "Medically unfit."			
‡Only if man has not been overseas.			

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

N.B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

WAR SERVICE BADGE

Class "A" No. 91127 ISSUED

WAR SERVICE BADGE

Class "B" No. 5767 ISSUED

## Proceedings on Discharge.

This space to be for numbers.

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.)

142  
22/5/19

No.	1078012
Rank	Sgt
Surname	ABBOTT
Christian name	Geo. Herbert
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	5th Pnr
Date of discharge	May 20th, 1919
Place of discharge	Montreal, Que
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age	47 years
Height	5 feet 6½ inches
Complexion	Medium
Eyes	Grey
Hair	Grey
Trade	Foreman of construction
Intended place of residence	327 1st Avenue, Verdun, Quebec
(To be given as fully as practicable.)	
2. The above-named man is discharged in consequence of R.O. 1420 ON DEMOB MED UNFIT FOR GEN SER.	
Authority for discharge.....	
N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.	
3. Conduct and character while in the service have been, according to the records, etc.	
N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.	
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)	
To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.	
H. L. Comp. 20-10-19	

M. F. B. 218.

200M.—5-18.  
H. Q. 1772-39-113.

(OVER)

5. He is in possession of the following number of G. C. Badges

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

Three horizontal lines for listing medals and decorations.

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company, (Squadron or Battery), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place).....

(Date)..... Commanding.....

8. Certificate to be signed by the Soldier on Discharge

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page, and that I have received my permanent discharge certificate.

(Place) Montreal, Que *G. H. Abbott. Sgt.* (Signature of Soldier.)

(Date) May 20th, 1919 *A. Phelley B/M* (Signature of Witness.)

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

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

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

..... (Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to.... (the date to which the Record of Service is completed).....years.....days.

Total.....years.....days.

11. Confirmation of Discharge.

The discharge of the above-named man is hereby confirmed.

(Place) Montreal, Que

(Signature) *[Signature]* Captain,

Officer i/c Discharge Section, District Depot No. 4.

(Date) May 20th 1919

Reservations referred to at Para. 8.

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

NO RESERVATIONS

*G. H. Abbott. Sgt.*

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

REGT. No. *1078012* RANK *RtE* NAME (IN FULL) *Abbott G. H*

M. OR S. *OP*

RELATIONSHIP *(circled)*

PARTICULARS *T.O.S* EFFECTIVE DATE *14-12-18* AUTHORITY *Do 246/2*

ADDRESS *Montreal* PLACE OF ATTESTATION *Montreal* TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION *17.3-16* TRANSFERRED TO *o/s France* DATE EFFECTIVE

ASSIGNED PAY, \$ *25.00* DATE EFFECTIVE *Jan 1st*

PAYABLE TO *Mr Ellen Abbott* RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS *327-1st Ave Verdun Montreal*

STOP PAYMENT FORM RENDERED, DATE EFFECTIVE

DISCHARGED *Montreal* DATE *20.5.19* REASON *DD 142-3* AUTHORITY *RD 1420 Auth 142-3*

MONTH	NO. OF DAYS	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
		\$	C.	\$	C.	\$	C.	COL. NO. 1	COL. NO. 2	COL. NO. 3	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	
1919																								
Jan	31	1.00	34.10		5.05	39.15								30.00						19.59				Jan up to 26-12-19 9-1-19 19.59-Dr. L.P. Cr. 1-1-19 Do 246/2
Feb	28	1.50	42.00		22.40	64.40								25.00						10.80				
Mar	31	1.50	46.50		17.60	64.10								25.00						30.00				
Apr	30	1.50	45.00		30.00	75.00								25.00						30.00				
May	20	1.50	30.00		30.00	60.00								25.00						114.00				
						40.30								30.00						50.00				
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						40.30																		





C 1078012 Sgt. Abbott G. L. Ass. Pay \$25.00

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

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFERRED PAY	SEPARATE ENG.
1917											
Sept	Bal.								78 38		
Oct									25		
"	SP	46 50							99 88		
Nov				AR 607 30 7/17 SCRT	5 35				25		
	S.P	45 00		✓ 552 15 9/17	5 36						
	" Dec	46 50		✓ 662 31 10/17	10 71						
1918				Dec AP		21 42			119 96		
Jan									25		
				AR 722 15 11/17 SCRT	5 35						
				✓ 776 30 11/17	12 49						
				✓ 826 15 12/17	5 35						
				✓ 906 31 12/17	10 71						
	SP	46 50				33 90			107 56		
Feb	SP	42 00							25		
				AR 927 15 1/18 SCRT	5 35						
				✓ 984 31 1/18	5 35				113 86		
Mar						10 70			46 50		
	SP	46 50		✓ 1038 13 1/18	8 70				160 36		
				✓ 1074 15 1/18	5 35				151 33		
				GA P.					25		
				AR 1147 31 3/18 SCRT	13 38				29 03		
						106 33					

\* Strike out whichever inapplicable.

ASSIGNED PAY	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.
EFFECTIVE DATE:-	1/12/16	EFFECTIVE DATE:-	
AMOUNT:-	25 <sup>00</sup>	AMOUNT:-	

NAME: ABBOTT George Henry  
 NUMBER: 1048012

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 Ellen Abbott (Wife)  
324. [unclear] P.O.  
1-12-18

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
<u>Plt J. 14/8/14 56RT.</u>	<u>15/3/14</u>	<u>Sgt</u>

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
<u>20-11-18</u>	<u>8173</u>	<u>3ced.</u>	<u>121.60</u>	<u>30-11-18</u>		<u>bal per L.S.</u>	<u>69.88</u>
						<u>L.P.6</u>	<u>55.28</u>

UNIT AND TRANSFERS  
 ORIGINAL UNIT: 5<sup>th</sup> Pioneer Battalion  
 DATE ACCOUNT FIRST OPENED: 1-12-16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T.S.F.D.	UNIT TRANSFERRED TO
			<u>5<sup>th</sup> B.R.T.</u>

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	<u>1.35</u>	<u>15</u>		

PARTICULARS OF RENDERING NON-EFFECTIVE: to Canada 30-11-18 293a 16-1-18 to Canada 12-12-18 CRTY.

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<u>March</u>	<u>Bal forward</u>								<u>29.03</u>		
<u>April</u>	<u>Sgt Pay</u>	<u>45.00</u>		<u>June &amp; July 1917 Can A.P. charged @ 22<sup>00</sup></u> <u>25<sup>00</sup> paid by Ottawa office in 4/18 Opagms</u> <u>transit dated 10/4/18</u> <u>A.P.</u>					<u>6.00</u>		
				<u>3. 15/4/18. 5<sup>th</sup> CRJ</u>	<u>7.14</u>						
				<u>116. 5<sup>th</sup> B.R.T. 20/4/18</u>	<u>5.35</u>				<u>20.54</u>		
		<u>45.00</u>			<u>12.49</u>			<u>31.00</u>			
<u>May</u>	<u>✓</u>	<u>46.50</u>		<u>A.P.</u>				<u>25</u>	<u>52.04</u>		
				<u>200. 5<sup>th</sup> CRJ. 15/5</u>	<u>5.35</u>				<u>46.69</u>		
				<u>290 ✓ 21/5</u>	<u>5.35</u>				<u>41.34</u>		
		<u>46.50</u>			<u>110.70</u>			<u>25</u>			
<u>June</u>	<u>SP</u>	<u>45</u>		<u>Can A.P.</u>				<u>25</u>			
				<u>AR 380 15/6/18 5<sup>th</sup> CRJ</u>	<u>5.35</u>						
				<u>✓ 522 30/6/18 ✓</u>	<u>5.35</u>						
		<u>45</u>			<u>10.70</u>			<u>25</u>	<u>50.64</u>		
<u>July</u>	<u>Sgt Pay</u>	<u>46.50</u>		<u>A.P.</u>				<u>25</u>			
				<u>✓ 570 31/7/18 ✓</u>				<u>25</u>	<u>72.14</u>		
<u>Aug</u>	<u>✓</u>	<u>46.50</u>		<u>bal</u>				<u>25</u>			
				<u>✓ 2591 8/8/18 CGH Epo.</u>	<u>9.73</u>						
		<u>46.50</u>			<u>9.73</u>			<u>25</u>	<u>83.91</u>		
<u>Sept</u>	<u>✓</u>	<u>45.00</u>		<u>Can</u>				<u>25</u>			
				<u>1103 4/9/18 Epo.</u>	<u>9.73</u>						
		<u>45</u>			<u>9.73</u>			<u>25</u>	<u>94.18</u>		
<u>Oct</u>		<u>46.50</u>		<u>Can</u>				<u>25</u>	<u>115.68</u>		
	<u>S.F. 7-10-16 17-10-18 10 days</u> <u>2-0 240 11-10-18 3ced.</u>	<u>7.30</u>		<u>✓ 1103 7-10-18 ✓</u>	<u>48.67</u>				<u>67.01</u>		
				<u>Quods B.R.T. 7-10-18 ✓</u>	<u>10</u>				<u>66.91</u>		
									<u>74.21</u>		

NUMBER 1078012

RANK

*Sgt.*

NAME

*ABBOTT George Henry*

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
<i>Oct.</i>	<i>Balance Forward</i>	<i>5380</i>			<i>48 77</i>			<i>25-</i>	<i>74 21</i>		
				<i>AR 7429 36 28-10 3CC.D.</i>	<i>973-</i>				<i>64 48</i>		
		<i>5380</i>			<i>58 50</i>			<i>25</i>			
<i>Nov</i>		<i>45-</i>		<i>CAP</i>				<i>25</i>	<i>84 48</i>		
				<i>✓ 7750 1 19-11</i>	<i>✓ 14 60-</i>				<i>69 88</i>		
				<i>✓ 8172 30 29-11</i>	<i>✓ 14 60-</i>				<i>55 78</i>		
		<i>45-</i>			<i>29 20</i>			<i>25</i>			

**CANADIAN**  
**ASSIGNED PAY AUDITED**  
*OK*  
*awstarris*  
**AUDIT CLERK**  
**DATE 17-5-19**