

## REGIMENTAL DOCUMENTS

NAME

*ALLEN. Ben.*

REGT. NO.

*470099*

UNIT

*124<sup>th</sup> Batta*

H. Q. FILE NO.

*5486*

## CONTENTS

## DATE RECEIVED

## TO WHOM FORWARDED

## DATE FORWARDED

M. F. W. 2505  
REFERENCE

## NON-EFFECTIVE BY

## DEATH

Category

*Killed in Action**9/10 - 14 - 17*

## DISCHARGE

Category

## DESERTION

- 3 ATTESTATION PAPER (M.F.W. 23, 133, or 51)
- / CASUALTY FORM (M.F.W. 54 or A.F.B. 103)
- / TRAINING HISTORY SHEET (M.F.W. 113) *Record sheet*
- FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)
- / REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)
- / COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)
- 2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)
- DENTAL HISTORY SHEET (M.F.B. 465)
- 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)
- 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)
- 1 *Form of Will*
- 4 *Misc cards*
- Paysheet*

OPEN  
(ATIA)

130 x 90

## ATTESTATION PAPER.

No. 770099

Folio.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

## QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... A L L E N  
1a. What are your Christian names?..... Ben  
1b. What is your present address?..... 9 Alcina Ave. Toronto Ont.  
2. In what Town, Township or Parish, and in what Country were you born?..... Wymer, B. C. Can.  
3. What is the name of your next-of kin?..... Isabel Allen  
4. What is the address of your next-of-kin?..... 9 Alcina Ave. Toronto Ont. Can.  
4a. What is the relationship of your next-of-kin?..... Mother  
5. What is the date of your birth?..... July 17, 1897  
6. What is your Trade or Calling?..... Clerk  
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 } Yes  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

## DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Ben Allen, 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.

Ben Allen (Signature of Recruit)

Date 11th January 1916 191 . W. Malone (Signature of Witness)

## OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Ben Allen, 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.

Ben Allen (Signature of Recruit)

Date 11th January 1916 191 . W. Malone (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 Toronto this 11th day of January 1916 191 .

W. Malone (Signature of Justice)

Description of Ben Allen 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. 10 ins.Chest measurement. { Girth when fully expanded.....35 ins.  
Range of expansion.....3 ins.Complexion.....FairEyes.....BlueHair.....BrownReligious denominations { Church of England.....  
Presbyterian.....  
Methodist.....Meth.  
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.....11th January 1916.....191Place.....Toronto

\*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:—

Toronto Recruiting Depot  
Medical Officer.

## CERTIFICATE OF OFFICER COMMANDING UNIT.

.....Ben Allen.....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.....JAN 14 1916.....191

O. C. 124th OVERSEAS BN. C. E. F.  
(Signature of Officer)

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

# Casualty Form—Active Service.

M. F. W. 54.  
150M. 10-15.  
H.Q. 1772-39-920.

Unit, Regiment or Corps 124th OVERSEAS BATTALION C.E.F.

Regimental No. 770099 Rank Pte Name Allen Ben  
C. E. F.

Enlisted (a) 11/1/14 Terms of Service (a) 1 Year or during the War Service reckons from (a) 11/1/14

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. |
|--------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------|------------------------------------------------------------------------------------|
|--------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------|------------------------------------------------------------------------------------|

|  |                 |         |              |  |
|--|-----------------|---------|--------------|--|
|  | Embarked Canada | Halifax | Aug. 7, 1916 |  |
|--|-----------------|---------|--------------|--|

|  |                 |           |               |  |
|--|-----------------|-----------|---------------|--|
|  | Arrived England | Liverpool | Aug. 18, 1916 |  |
|--|-----------------|-----------|---------------|--|

|                    |                                                |             |         |                                          |
|--------------------|------------------------------------------------|-------------|---------|------------------------------------------|
| 3-12-16, 124th Bn. | Transferred for Overseas Service to P.F.C.L.I. | Witley Camp | 3-12-16 | Pt. II Order No. 259 261 <i>RW Jones</i> |
|--------------------|------------------------------------------------|-------------|---------|------------------------------------------|

MAJOR ADJUTANT,

124th BATTALION C.E.F.

|          |                |                                                   |                     |                       |              |                     |
|----------|----------------|---------------------------------------------------|---------------------|-----------------------|--------------|---------------------|
| 6-12-16  | O. C. C. B. D. | Landed in France. Taken on strength 60th Cdn. Bn. | P.P.C.L. 2          | Nom. Roll d/ 6-12-16  | Pt II D. 081 | 11-12-16            |
| 13-12-16 | do             | Left for Unit                                     | Field               | Nom. Roll d/ 13-12-16 |              |                     |
| 10-2-17  | O. C. En.      | Arrived Unit in                                   | Field               | 4-2-17                | B 213        |                     |
| 11-2-17  | 9 C 7a         | S. A. H.                                          | Adm 9 C 7a          | 8-2-17                | A 36 62515   | D 6 S 465 af- 3 3/4 |
| "        | "              | "                                                 | Adm 4 C 7a          | 10-2-17               | "            | 3 3/4               |
| "        | 10 C. F. A.    | "                                                 | Adm. 10 C. F. A.    | 1-2-17                | A 36 62507A  | W.S. 466df. 7-3-17  |
| "        | "              | "                                                 | Trans. 3 W. R. Stn. | 8-2-17                | "            | " d/ 7-3-17         |
| 17-2-17  | 4 C. F. A.     | Blanchitis                                        | Adm. 4 C. F. A.     | 10-2-17               | A 36 22526   | W.S. 466df. 7-3-17  |

(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.]

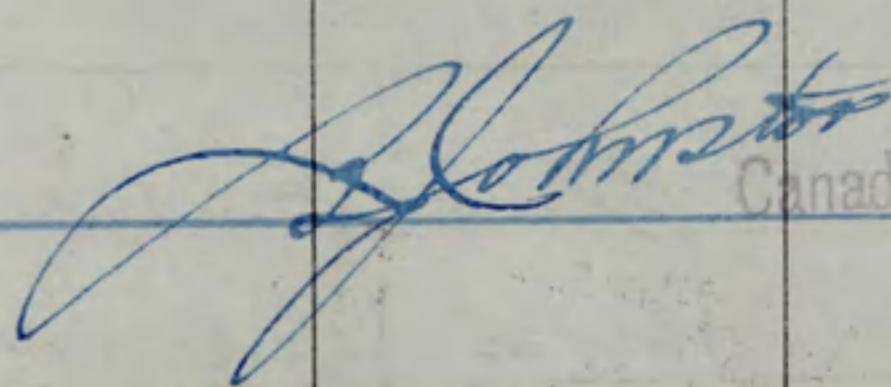
CERTIFIED CORRECT.  
15 DEC. 1916  
CAN. RECORDS, LONDON.

#110099

Private Allen.

Ben,

| 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 |                                                                                                                                                                                                                 |        |           |                                                                                    |
| 24.2.17  | H.C.F.A.           | Bronchitis acute adm. H.C.F.A.                                                                                                                                                                                  |        | 10-2-17   | a36/E2764 DCS.467d/10-3-17.                                                        |
| 3.3.17   | "                  | " " " to duty unit                                                                                                                                                                                              |        | 25-2-17   | " / E2806 DCS.470d/.                                                               |
| 14-4-17. | ocBn               | Killed in Action                                                                                                                                                                                                | Field. | 9/10-4-17 | B213 DCS.480 d/-22-4-17.<br>Part II Order 34 d/-22-4-17.                           |



Major &  
Lieut. for A. A. G.  
Canadian Section, G. H. Q. 3rd Echelon, B. E. F.



# FORM OF WILL.

I, Ben Allen (Name in full)  
Regimental Number 770099 serving in 124th Bn. C.E.F.  
of the Canadian Expeditionary Force, do hereby revoke all former Wills by me  
made and declare this to be my last Will.

I bequeath all my real estate unto

Mrs Isobel Allen  
9 Alcina Ave  
Toronto Can  
Name and Address  
of person or  
persons to whom  
it is to go.

absolutely, and my personal estate I bequeath to

Mrs Isobel Allen  
9 Alcina Ave  
Toronto Can  
Name and Address  
of person or  
persons to receive  
personal estate\*  
(See note).

**IMPORTANT  
NOTE**  
This must be Signed  
and Dated by  
THE SOLDIER  
HIMSELF.

this 30th day of July A. D. 191 6  
Ben Allen Signature of Soldier.

\*N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything  
except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence  
of us both present at the same time, who in his presence, at his request, and in  
the presence of each other have hereunto subscribed our names as Witnesses.

Signature of First Witness

Address of Witness

Occupation of Witness

Signature of Second Witness

Address of Witness

Occupation of Witness

THE TWO  
WITNESSES  
MUST  
SIGN HERE

# FORM OF WILL

I, John Doe, of the County of Alameda, State of California,

do hereby certify that I am of sound mind and memory, and am not under any legal disability,

and I do hereby declare that I am not married, and have no legal wife or husband,

and I do hereby declare that I am not under any legal disability,

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ORIGINAL  
MEDICAL HISTORY SHEET.

ORIGINAL

Surname Allen Christian Name Ben 770099

Examined { on 11 day of January 1916  
at Toronto  
Birthplace { City or Town Wymer, B. C. Can.  
County \_\_\_\_\_

Approved by [Signature]  
Rank Capt M.O.  
Toronto Recruiting Depot

Apparent age 18 yrs.  
Trade or occupation Clerk  
Height 5 Feet 10½ Inches. M.O.  
Weight 117 Lbs. M.O.  
Chest measurement { Minimum 32 inches. M.O.  
Maximum expansion 35 inches. M.O.  
Physical development Poor M.O.  
Small-Pox Marks \_\_\_\_\_ M.O.

Vaccination Marks { Arm \_\_\_\_\_ Right \_\_\_\_\_ Left \_\_\_\_\_  
Number \_\_\_\_\_  
When Vaccinated last 2/8/16 2nd S. Macpherson Capt M.O.  
(a) Marks indicating congenital peculiarities or \_\_\_\_\_ M.O.  
previous disease \_\_\_\_\_ M.O.

(b) Slight defects but not sufficient to cause rejection  
1/31/16 2nd S. Macpherson Capt M.O.  
2/4/16 " " M.O.  
2/9/16 " " M.O.  
T.A.B. 8.9.16

Enlisted on 11 day of January 1916 191 at Toronto

|                      | CORPS.                                 | REG'TL NUMBER. | HABITS. | DATE. |
|----------------------|----------------------------------------|----------------|---------|-------|
| Joined on enlistment | <u>124th Batta.</u><br><u>WINNIPEG</u> | <u>770099</u>  |         |       |
| Transferred to       | <u>P.P.C.L.I</u>                       |                |         |       |

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

| STATION. | DATE. | DISEASE. | RESULT. |
|----------|-------|----------|---------|
|          |       |          |         |
|          |       |          |         |
|          |       |          |         |

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.

Christian Name.

| STATION.                    | Date of Arrival<br>at the<br>Station. | DATES OF                    |       |      |                             |       |      | DISEASE.   | Number of<br>days in<br>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<br>of Medical Officer. |
|-----------------------------|---------------------------------------|-----------------------------|-------|------|-----------------------------|-------|------|------------|-----------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
|                             |                                       | Admission<br>into Hospital. |       |      | Discharge<br>from Hospital. |       |      |            |                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                  |
|                             |                                       | Day                         | Month | Year | Day                         | Month | Year |            |                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                  |
| Drug Camp Hot Springs, Ark. | June 8/16                             | 8                           | June  | 16   | 9                           | June  | 16   | Bronchitis | 4                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                              | A. M. Humphreys, M.D.            |

A.G.R. Rank Name **ALLEN, Ben** Reg'l No. **770099**

Unit **124th Bn.** If in perm. Corps, }  
What Unit? }

Place and Date of Enlistment **Toronto, 11th Jan., 1916.** Married or Single **Single.** ✓

Place of Birth **Wymer, B.C., Can.**

Name and Address, Next-of-Kin **Isabel Allen,**  
**9 Alcina Ave., Toronto, Ont., Canada.** Relationship **Mother.** 36

Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

N/E. R.B. No. **2497**  
File R.L. **25-A-1077**  
Category **Final**

## Discharge, Date and Place

## Reason

## Character

H. W. &amp; 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.

Arrived in England S.S. Cameronia 13.8.16

5.12.16. 1st Lt. B. O. Souther to P.P.C.L.I. Witley 5.12.16. P.H. 50261. H.W.

11.12.16 PPCLI TAKEN ON STRENGTH FIELD 6.12.16 PT 2-0 81

10.2.17 P.P.C.L.I. Adm Corps Rest Station 10.2.17 S.H. A 569 S.A.H. III

28.3.17 Dis ✓ 25.2.17 Ch. A 586

22.4.17 ✓ Killed in Action ✓ 9/10/4/17 P.I. 034

26.4.17 ✓ Killed in Action ✓ 9/10.4.17 Ch. A. 609

A.F.B. 103 CHECKED

13 DEC. 1916

[illegible]

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

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

*f 25/17*  
*Rob*

**32**

Sheet No. 7.

*Mrs Isabella Allen*

Name of Soldier

*Allen Ben.*

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

PAYMENTS.

# *770099. Pte. "D" 124th. Bn.*

| Month. | Year. | Cheque No.    | Amt.      | Remarks.                                          |
|--------|-------|---------------|-----------|---------------------------------------------------|
| April  | 1916  |               |           | <i>20<sup>00</sup></i>                            |
| May    |       |               |           | <i>200<sup>00</sup> C.F.X. J.G. Hoare 12-5-17</i> |
| June   |       |               |           | <i>Acct. closed 31-5-17 J.G. Hoare 12-5-17</i>    |
| July   |       |               |           |                                                   |
| Aug.   |       | <i>114914</i> | <i>20</i> |                                                   |
| Sept.  |       | <i>15033</i>  | <i>20</i> |                                                   |
| Oct.   |       | <i>19385</i>  | <i>20</i> |                                                   |
| Nov.   |       | <i>24493</i>  | <i>20</i> |                                                   |
| Dec.   |       | <i>31784</i>  | <i>20</i> |                                                   |
| Jan.   | 1917  | <i>735908</i> | <i>20</i> |                                                   |
| Feb.   |       | <i>41713</i>  | <i>20</i> | <i>20 J.G.</i>                                    |
| March  |       | <i>47776</i>  | <i>20</i> | <i>20 L</i>                                       |
| April  |       | <i>229</i>    | <i>20</i> |                                                   |
| May    |       | <i>16325</i>  | <i>20</i> | <i>20 L G6325 cancelled</i>                       |
| June   |       |               |           |                                                   |
| July   |       |               |           |                                                   |
| Aug.   |       |               |           |                                                   |
| Sept.  |       |               |           |                                                   |
| Oct.   |       |               |           |                                                   |
| Nov.   |       |               |           |                                                   |
| Dec.   |       |               |           |                                                   |
| Jan.   | 1918  |               |           |                                                   |
| Feb.   |       |               |           |                                                   |
| March  |       |               |           |                                                   |
| April  |       |               |           |                                                   |
| May    |       |               |           |                                                   |
| June   |       |               |           |                                                   |
| July   |       |               |           |                                                   |

F. X. Rend. Date..... By.....  
 E.F.X. " Date *9/10/17* By *J.G.*

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

**PAYMENTS.**

Name of Soldier \_\_\_\_\_

| 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.   |       |            |      |  |          |  |

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

M. F. W. 12.  
 50m.—6-16.  
 H. Q. 1772-39-819.

Mrs

To Whom

Isabella Allen,

By Whom Assigned

Allen

Ben.

Address

9 Alcina Ave.,

Toronto Ont.

Regtl. No. 770099

Rank

Pte.

Corps

"D" 124th. Bn.

Rate \$20 00

AUG 1 1918

## PAYMENTS

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

E. X. Rend. Date ..... By .....  
 E. F. X. " Date 9/1/17 By J. P. L.

Pensions Notified DATE 12-5-17  
 Killed in Action DATE 9-10-4-17  
 G. H. (17) 28-4-17 R. G. H. 12-5-17



Surname  
**Allen**

Christian Name or Names  
**B.**

Reg. No.  
**770099**

Rank  
**Pte.**

Unit  
**P.P.C.L.I.**

Co.

Troop

Batty.

Hospital  
**Corps Rest Station**

Date of Admission  
**10-2-17.**

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis  
**D.A.H.**

(1)  
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

*Disch 25-2-17* Date

C.L. 7-3-17 A569  
*- 28-3-17 @ 586*

REMARKS

A.M.D. 2 DEPT.  
Beh. of D.G.M.S. O.M.F.C. London.

*oh*

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

|          |                         |                   |
|----------|-------------------------|-------------------|
| Surname  | Christian Name or Names | Reg. No.          |
| Allen    | B.                      | 770099            |
| Rank     | Unit                    | Co. Troop Batty.  |
| Pte      | P.P.C.L.I.              |                   |
| Hospital |                         | Date of Admission |

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1)  
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

Killed in Action 9/10-4-17

DISPOSITION

Date

C.L.25-4-17 A609

REMARKS

A.M.D. 2 DEPT.

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

8.

# EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

LIST No

HOSPITAL

DATE OF  
ADMISSION

REMARKS

|         |                    |           |                  |
|---------|--------------------|-----------|------------------|
| A. 569. | Corps Headquarters | 10-2-17   | D. Q. H.         |
| A 586   | Discharged         | 25-2-17   | " " "            |
| A 609"  | Rep. from Base     | 9/10-4-17 | Killed in action |

REGT'L No

470099

H. Q. FILE NO. 649-

NAME

Allen B. ex.

RANK AND CORPS

Rte. P. P. C. L. L. Norm

FOLLOWS

NO.

124th Bn

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY

|        |         |                                                            |
|--------|---------|------------------------------------------------------------|
| 2855.  | 27-4-17 | Killed in action between April 9th & April 10th 1917. ✓    |
| B20909 | 24-4-17 | Killed in action France or Belgium 9/10-4-17 noted 20-4-17 |

REMARKS .....

1562 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 101 102 103 104 105 106 107 108 109 110 111 112 113 114 115 116 117 118 119 120 121 122 123 124 125 126 127 128 129 130 131 132 133 134 135 136 137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 156 157 158 159 160 161 162 163 164 165 166 167 168 169 170 171 172 173 174 175 176 177 178 179 180 181 182 183 184 185 186 187 188 189 190 191 192 193 194 195 196 197 198 199 200 201 202 203 204 205 206 207 208 209 210 211 212 213 214 215 216 217 218 219 220 221 222 223 224 225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241 242 243 244 245 246 247 248 249 250 251 252 253 254 255 256 257 258 259 260 261 262 263 264 265 266 267 268 269 270 271 272 273 274 275 276 277 278 279 280 281 282 283 284 285 286 287 288 289 290 291 292 293 294 295 296 297 298 299 300 301 302 303 304 305 306 307 308 309 310 311 312 313 314 315 316 317 318 319 320 321 322 323 324 325 326 327 328 329 330 331 332 333 334 335 336 337 338 339 340 341 342 343 344 345 346 347 348 349 350 351 352 353 354 355 356 357 358 359 360 361 362 363 364 365 366 367 368 369 370 371 372 373 374 375 376 377 378 379 380 381 382 383 384 385 386 387 388 389 390 391 392 393 394 395 396 397 398 399 400 401 402 403 404 405 406 407 408 409 410 411 412 413 414 415 416 417 418 419 420 421 422 423 424 425 426 427 428 429 430 431 432 433 434 435 436 437 438 439 440 441 442 443 444 445 446 447 448 449 450 451 452 453 454 455 456 457 458 459 460 461 462 463 464 465 466 467 468 469 470 471 472 473 474 475 476 477 478 479 480 481 482 483 484 485 486 487 488 489 490 491 492 493 494 495 496 497 498 499 500 501 502 503 504 505 506 507 508 509 510 511 512 513 514 515 516 517 518 519 520 521 522 523 524 525 526 527 528 529 530 531 532 533 534 535 536 537 538 539 540 541 542 543 544 545 546 547 548 549 550 551 552 553 554 555 556 557 558 559 560 561 562 563 564 565 566 567 568 569 570 571 572 573 574 575 576 577 578 579 580 581 582 583 584 585 586 587 588 589 590 591 592 593 594 595 596 597 598 599 600 601 602 603 604 605 606 607 608 609 610 611 612 613 614 615 616 617 618 619 620 621 622 623 624 625 626 627 628 629 630 631 632 633 634 635 636 637 638 639 640 641 642 643 644 645 646 647 648 649 650 651 652 653 654 655 656 657 658 659 660 661 662 663 664 665 666 667 668 669 670 671 672 673 674 675 676 677 678 679 680 681 682 683 684 685 686 687 688 689 690 691 692 693 694 695 696 697 698 699 700 701 702 703 704 705 706 707 708 709 710 711 712 713 714 715 716 717 718 719 720 721 722 723 724 725 726 727 728 729 730 731 732 733 734 735 736 737 738 739 740 741 742 743 744 745 746 747 748 749 750 751 752 753 754 755 756 757 758 759 760 761 762 763 764 765 766 767 768 769 770 771 772 773 774 775 776 777 778 779 780 781 782 783 784 785 786 787 788 789 790 791 792 793 794 795 796 797 798 799 800 801 802 803 804 805 806 807 808 809 810 811 812 813 814 815 816 817 818 819 820 821 822 823 824 825 826 827 828 829 830 831 832 833 834 835 836 837 838 839 840 841 842 843 844 845 846 847 848 849 850 851 852 853 854 855 856 857 858 859 860 861 862 863 864 865 866 867 868 869 870 871 872 873 874 875 876 877 878 879 880 881 882 883 884 885 886 887 888 889 890 891 892 893 894 895 896 897 898 899 900 901 902 903 904 905 906 907 908 909 910 911 912 913 914 915 916 917 918 919 920 921 922 923 924 925 926 927 928 929 930 931 932 933 934 935 936 937 938 939 940 941 942 943 944 945 946 947 948 949 950 951 952 953 954 955 956 957 958 959 960 961 962 963 964 965 966 967 968 969 970 971 972 973 974 975 976 977 978 979 980 981 982 983 984 985 986 987 988 989 990 991 992 993 994 995 996 997 998 999 1000 1001 1002 1003 1004 1005 1006 1007 1008 1009 1010 1011 1012 1013 1014 1015 1016 1017 1018 1019 1020 1021 1022 1023 1024 1025 1026 1027 1028 1029 1030 1031 1032 1033 1034 1035 1036 1037 1038 1039 1

.....

REG. NO. 77 0099 NAME Allen B.  
(SURNAME FIRST)

RANK Pte CORPS 124-b

AGE 18 SERVICE

NAME OF HOSPITAL Niagara Hospital PLACE Niagara

DATE OF ADMISSION 5-6-16

DISEASE Bronchitis

DISCHARGE 9-6-16

OPERATION

DISCHARGED TO DUTY Yes

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

[illegible]

Name Allen, Ben.Rank PrivateReg. No. 770099.Unit P.F.C.I.I.*RL 25-A-1077*Next of Kin Canada.

| Date                   | Movement                              | Place | Casualty            | List No.     | Notified N/K O. | W.O. List       |
|------------------------|---------------------------------------|-------|---------------------|--------------|-----------------|-----------------|
| <i>1917</i>            | <i>10<sup>th</sup> Corps Red Sea.</i> |       | <i>D.A.A. #569.</i> |              |                 |                 |
| <i>25<sup>th</sup></i> | <i>Expd</i>                           |       | <i>"</i>            | <i>#580.</i> |                 |                 |
| <i>104-17</i>          | <i>Killed in action.</i>              |       |                     | <i>#609.</i> | <i>2865</i>     | <i>26/4/17.</i> |

M c 803

/

ALLEN, Pte. B. <sup>L</sup>EN #770099- <sup>C</sup>P.P.C.21. <sup>A</sup>649-A-4083 ✓

MEDALS: Mrs. I. Allen,  
6 Alcina Ave.,  
Toronto, Ont.

(MOTHER)

P. & S.

(Serial no. 760216)

C. OF S.

MOTHER (AS ABOVE)

J. C. Allan Tutton  
9 Alcina Ave  
Toronto Ont.

DEC 18 1920  
Scroll Desp. \_\_\_\_\_ Reqn. No. 25739

NOV 2 1921  
Plaque Desp. \_\_\_\_\_ Reqn. No. P 14428

OK  
20/11/21



No. 770099. RANK *Pte*NAME *Allen. B.*T. O. S. *12-1-16.*  
(*DO. 11 of 14-1-16*)UNIT *124th Battalion A. E. F.*M. D. *2*

| PAID<br>FROM                  | PAID<br>TO                      | SIG<br>OR<br>REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. |           |
|-------------------------------|---------------------------------|--------------------|-----------------------------------------|-----------|
|                               |                                 |                    | PARTICULARS                             | AUTHORITY |
| <i>1916</i><br><i>Jan. 12</i> | <i>1916.</i><br><i>Jan. 31.</i> | <i>✓</i>           |                                         |           |
|                               | <i>Feb.</i>                     | <i>✓</i>           |                                         |           |
|                               | <i>Mar.</i>                     | <i>✓</i>           |                                         |           |
|                               | <i>Apr.</i>                     | <i>✓</i>           |                                         |           |
|                               | <i>May</i>                      | <i>✓</i>           |                                         |           |
|                               | <i>June</i>                     | <i>✓</i>           |                                         |           |
|                               | <i>July</i>                     | <i>✓</i>           |                                         |           |
|                               | <i>Aug</i>                      | <i>✓</i>           |                                         |           |

[illegible]

DATE \_\_\_\_\_ AUTHORITY \_\_\_\_\_

PAY OFFICE, N. E. DIST. CANTONMENT, SINGAPORE

RELATIONSHIP *Mother*

Carry forward.

Statement of  
AUG 25 1917  
Account rendered

