



ATTESTATION PAPER.

No. 18314

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- 1. What is your name?..... *Ralph Bell*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *Highgate, London, N. York*
- 3. What is the name of your next-of-kin?..... *Wm. E. Bell*
- 4. What is the address of your next-of-kin?..... *105 Charlotte St. Forest Hill, Sydney, N.S.W.*
- 5. What is the date of your birth?..... *March 23, 1881*
- 6. What is your Trade or Calling?..... *Bookbinder*
- 7. Are you married?..... *No*
- 8. Are you willing to be vaccinated or re-vaccinated?..... *Yes*
- 9. Do you now belong to the Active Militia?..... *No*
- 10. Have you ever served in any Military Force?.. *No*
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement?..... *Yes*
- 12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE?} *Yes*

Ralph Bell (Signature of Man).
H. Taggart (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Ralph Bell*, do solemnly declare that the above answers made by me to the above questions 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.

Ralph Bell (Signature of Recruit)
 Date *Sept 16* 1914. *H. Taggart* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Ralph Bell*, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Ralph Bell (Signature of Recruit)
 Date *Sept 16* 1914. *H. Taggart* (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 *Yale Park* this *23* day of *Sept* 1914.

Alvinth Payne (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

Wm. Payne (Approving Officer)

101 7ms
C 20

Description of Ralph Bell on Enlistment.

Apparent Age 33 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. 9 3/4 ins.

Chest measurement { Girth when fully expanded 36 1/2 ins.
Range of expansion 3 1/2 ins.

Tattoo Hands clasped across Heart A.S. on left forearm

Complexion Medium

Eyes Blue

Hair Brown

- Religious denominations. { Church of England
- Presbyterian
- Wesleyan
- Baptist or Congregationalist
- Other Protestants (Denomination to be stated.)
- Roman Catholic
- Jewish

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 Sept 1914.

W.P. Dorian

Place Valcartier

Maj. Amé
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.

R. Bell having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

A. Herbert Wayne (Signature of Officer)
Capt

Date Sept 23 1914.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 13314 (Rank) Private

Name (in full) Ralph BELL enlisted in

the Ninth Battalion, C.E.F.

CANADIAN EXPEDITIONARY FORCE at Valcartier, Quebec on the Sixteenth

day of September 1914

HE served in FRANCE

and is now discharged from the service by reason of "Being Medically unfit".

R.O. 1420--12-12-18

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

Age 37 Years 10 Months

Height 5 Ft. 10

Complexion Fresh

Eyes Blue

Hair Brown

Marks or Scars

G.S.W. L. Hip

Ralph Bell

Signature of Soldier

A. E. White capt.

Issuing Officer

Date of Discharge February 21st, 1919

Rank

Officer i/c Discharge Section District Depot M. D. 13

Appointment

Signed at Calgary Alberta this Twenty-first day of February 1919

in Military District No. 13

File Reference No. 13 D- B 414

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. (Rank) Name

Unit

Address on Discharge

Character and Conduct

Former Occupation

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at this day of 19

Name of Officer

Rank

Appointment

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

Rank and Name BELL Ralph
 Regimental No. 18314
 Unit 9th., Batt.
 Date of enlistment Sept. 16th., 1914
 Place of birth England
 Married (Yes or No) No

Name and Address of Next-of-kin

~~Mrs. E. Bell~~

9616
 Mrs. Ralph Bell (wife)
 20 John St.
 Forest Lodge, Southampton.
 Hants.

~~45 Charles St., Forest Lodge,
 Sydney Australia~~

Date and place of discharge

Reason for discharge

Character on discharge

If in Permanent Force

Promotions or appointments

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				
27/4/15	O.C. 9th	Embarked to France Struck off 9th		26/4/15	Part II - 1.
9.5.15	O/C. 3.	Taken on strength 3rd Bt	Rouen	26/4/15	" "
10.6.15	C.D. 78	G. S. W. Buttock.	4 Gen Hosp Versailles	28.7.15	O.K. NK
15.6.15	" 82	Wounded slight.	Queen Mary H Whalley	8.6/15	
20.6.15	O.C. 23rd	Taken on strength 23rd	Shorncliffe	8.6.15	Pt II No. 143.
27.6.15	O.C. 3rd	Invalided to	England	8-6-15	Part II orders No 18
12.7.15	W. O. O.C.	Dischg. to Sick Furlough.	Queen M. Hpt 4. Whalley. Loe	9.7.15	C. L. 104. Sh. 2.
9-7-15	Queen Mary Hpt	Sick Furlough	Whalley.	9-7-15	3 Napier Street
4.9.15	O.C. 23	att. to Regt. Police	Shorncliffe	16-7-15	Durham Road Norwich
7.10.15	"	att. to Brig. Police "On Command"	"	7-9-15	Pt II 212
7.12.15	"	"On Command" attends signalling course	"	7.10.15	Pt II 238
				28.11.15	" 291

CC

H
 20230
 Sept 12

STY'S SERVICE

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				
11.1.16	Ch. 253.	Adm. Moore Parks	Shorncliffe	30.11.15	G.S. W. Hip Dinch Hosp 7.12.15
13.4.16	Ob. 23rd	"On Command" at mil. Control office	Folkestone	6 ¹² / ₁₅	PL = 86 CR/10148 3132 2.9.16
26.4.16	Ob. 12th	Taken on strength	Wandling	26.4.16	" 117
25-4-16	" 23rd	Trans to 12th Batt.	"	25-4-16	" 95
6-5-16	Ob. 12th	On Command Mil. Hospas	Police Shorncliffe	6-5-16	" 127
12.5.16	7th Hosp	att for pay re. while employed as mil police	"	12.5.16	" 73
20.4.16	23rd Res Bn.	ceases to be att. to mil. control office	Folkestone	19.4.16	" 92
25.4.16	7th Staff	ceases to be att. to 7th Hosp. on retg to duty with his regt	Shorncliffe	20.5.16	" 79
26.5.16	oc 12	On Command Mil Control office	Southampton	26.5.16	" 146
4.9.16	12th Res Bn	ad to 6th Hosp	Bearwood Wokingham	2.9.16	Ch. 185
31-1-17	12th Res Bn	Trans to Military Hospital	Shorncliffe	5-10-16	Ch. 5 (abuse of thigh)
8-8-17	"	University Hosp.	Southampton	4-8-17	Ch. 122

17-8-17 12. I.O.S. to 6th Hosp. Sandling 17-8-17 PL # 203 164 4/20-8-7 (COAD)

26-3-18 16th Res Bn. Quanted term to "Many etc" 24-3-18 PL # 083

24-10-18 12th Res Bn attached from 16th Res Bn " " 18-11-18 PL # 253 (16th Res Bn 2960/25/18)

19-11-18 " ceases att from 16th Res Bn " " 18-11-18 PL # 275 (D.O. 320 18-11-18)

10-12-18 16th Res Bn on Com. to C.D.D. Buxton " " 9.12.18 - 342

DEMOBILIZATION PAY DIVISION, M. D. No. 13

CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44.
1133 (D.P. 250M-12-18.
1772-39-903.

LAST PAY CERTIFICATE

Regimental No. 18314 Rank Pte Name Bell, R.
(Surname first)
 Unit C.A.M.C. who was* discharged
 On Feb. 21 1919, to.....
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1st Dec., 1918 to Feb. 21, 1919 the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month <u>Eng. I.P.C.</u>		119.95
Regimental Pay..... <u>83</u> days at \$ <u>1.00</u> c.....		83.00
Field Allowance..... <u>83</u> days at \$ <u>1.10</u> c.....		83.30
Separation Allowance.....		35.00
Clothing Allowance.....		35.00
Post Discharge Pay.....		12.00
*Other Credits <u>Subs. D.O. 24, 23-1-19 to 6-2-19, 15 days @ .80</u>		12.00
Advances		
Separation Allowance and Assigned Pay Cheque NO.....		
*Other Charges <u>A.P. Dec. Jan. Feb. paid by Ottawa England</u>	45.00	
<u>Recovery S.A. from 22 to 28 Feb. paid by England.</u>	9.00	
Balance on transfer or on discharge, cheque No. <u>A. 3428</u>	204.25	
Total	258.25	258.25

*Give particulars.

A monthly stoppage of \$ 15.00 (†) has..... (‡) been ~~paid~~ ^{ched} on account of
 Assigned Pay for the month of February 1919..... }
 and Separation Allee. for month of Feb. 1919..... } (to) Assignee Mrs. Dora A. Bell
 (Address) 20 John St., Southampton, England
(†) Insert amount to be assigned, whether it has been paid or not. (‡) Insert "not" if amount has not been paid for period of account.

ON TRANSFER OF AN OFFICER.

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

REMARKS:— C?P?M? England advised date of discharge
 State (1) date of enlistment.....married or single...Married.....
 (2) Separation Allowance, entitled or not...yes..... (3) Reason for discharge.....
 (4) Authority for discharge or transfer.....D.P. 13.....

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.

Date 20-2-19

Place Calgary

B. J. Seddall
 PAYMASTER—DEMOBILIZATION PAY DIVISION, M. D. 13 **Paymaster.**

N.B.—(A) This form is to be used for all ranks (vide Article 122-180 and 141) Financial Instructions, C.E.F., 1916.
 (B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.
 (C) For purposes of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. As payment of the balance will have been made, the words "on transfer or" will be deleted.
 (D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificate will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.

CLINICAL CHART.

Army Form B. 181.

(To be attached to Case Sheet.)

Corps 23rd Res Bn

Military Hospital He. B. Can.

No. 18314

Rank and Name Mr. Bell R.

Age 34

Service 16

Disease _____

Date of admission 30/1/15

Date of discharge _____

Result _____

Dates of Observation	Days of Disease																											
	<div style="display: flex; justify-content: space-between;"> 30123456 </div>																											
Temperature Fahrenheit	Time																											
	<div style="display: flex; justify-content: space-between;"> A.M.P.M.A.M.P.M.A.M.P.M.A.M.P.M.A.M.P.M.A.M.P.M.A.M.P.M.A.M.P.M.A.M.P.M.A.M.P.M.A.M.P.M.A.M.P.M.A.M.P.M.A.M.P.M.A.M.P.M.A.M.P.M.A.M.P.M.A.M.P.M.A.M.P.M.A.M.P.M.A.M.P.M.A.M.P.M.A.M.P.M.A.M.P.M.A.M.P.M.A.M.P.M.A.M.P.M.A.M.P.M.A.M.P.M.A.M.P.M. </div>																											
108° 107° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°																												
Pulse per Minute	<div style="display: flex; justify-content: space-between;"> 969092 </div>																											
Respirations per Minute																												
Motions per 24 hours																												

Signature [Handwritten Signature] In charge of case.

B.P.C.
ORIGINAL

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

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. Space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Edmonton. DATE 7-2-19.

1. 1 (a) Unit 9th Battn. (b) Regimental No. 18314. (c) Rank Pte.

(d) Surname Bell (e) Christian name Ralph.

(f) Home address G.W.V.A, Edmonton.

(g) Next of Kin Annie D. Bell. (h) Relationship Wife.

(i) Address of Next of Kin 20 John St, Southampton, England.

2. Age last birthday 37 Date of birth 28-3-81.

3. Enlistment, or Appointment (if an Officer) (a) Place Edmonton (b) Date 22-8-14

4. Personal description:

(a) Height 5' 10" (b) Weight 137 (c) Complexion Fresh.

(d) Colour of hair Brown (e) Colour of eyes Blue (f) Identification marks, Scars, etc.

5. Former trade or occupation Bricklayer.

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
---	-------	------

	PERIODS	
	From	To
<u>9th Bn.</u> <u>Trans to 3rd Battn.</u>		
Canada	<u>22-8-14.</u>	<u>15-9-14.</u>
England.....	<u>15-9-14.</u>	<u>15-2-15.</u>
France or other theatres of War.....	<u>15-2-15</u>	<u>date.</u>

7. Original disease, or injury 1. G.S.W left hip. 2. Defective hearing.

(a) Date of origin 1. May 24th/15. 2. January/15. (b) Place of origin 1. Festubert, France. 2. England.

(c) Cause 1. Shrapnel.

(d) Service conditions

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting number of the answer criticised.

Concur.

Encls:- Spec. Report-Hearing.
AFB. 179.
AFB. 178(3)
Dent. Cert.

(Contd from page 2)

Left ear 6 ft. Defective hearing left ear due to Chronic suppurative Otitis media. Condition is chronic, not likely to improve. "W.H. Brown." Capt. CAMC.

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.) Yes.

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.)

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

PLACE.....

DATE Edmonton. 7-2-19.

[Signature] Major, CAMC. President.
[Signature] Capt. CAMC. } Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

PLACE.....

DATE.....

..... President.
} Members

APPROVED BY *[Signature]* Captain C. A. M. C. SUPERVISOR OF MEDICAL BOARD APPROVED BY

[Signature] Assistant Director of Medical Services. *[Signature]* Director-General of Medical Services.

DATE FEB 8 1919 DATE.....

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).)

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

1. Scar mentioned above. 2. Small scar just posterior to great Trochanter left hip. 3. Small scar just below and posterior to 1st scar.

11.—(a) Did the disabling condition have its origin before enlistment? 1 & 2. 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.) 1 & 2. 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? 1 & 2 Permanent.

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

1. Surgical in Hosp. 2. No treatment.

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? Partially. (If not, briefly state why)

17. Recommendations Cat "E" for discharge.

A. G. Anderson Capt. CAMC. 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..... 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.....

Ralph Bell Rank. Signature of invalid examined.

X-RAYS R.V. Hospital NETLEY.

Regt! No. 18314

Name O. W. Bell

Regt. of ~~...~~ & Surrey

3 u

5-8-16

Left Hip:

A 6203

A small M. F. opposite & a collection
of M.F's just above the Lt Trochanter.
There is no bony lesion.

[Signature]

R.A.M.C.

I/c X-Rays

R.V. Hosp! Netley.

[Signature]

606

606

This space to be for numbers.

Proceedings on Discharge.

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

No.	18314
Rank	Pte.
Surname	BELL
Christian name	Ralph
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	9th Bn. C.E.F.
Date of discharge	February 21st, 1919
Place of discharge	Calgary, Alta.



1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age.....37.....years.....10.....months.
 Height.....5.....feet.....10.....inches.
 Complexion ~~xxxxx~~Fresh
 Eyes Blue
 Hair Brown
 Trade Bricklayer
 Intended place of residence } G.W.V.A. Edmonton,
 (To be given as fully as practicable.) } Alta.

Descriptive marks

G.S.W.L. Hip.

2. The above-named man is discharged in consequence of

MEDICALLY UNFIT

Authority for discharge R.O. 1420--12-12-18
 13 D.D. Part II DO 52--21-2-19

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.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

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.)

MEDICAL DOCUMENTS
 FORWARDED TO
 S. O. R. OR B. O. C.
 — ON —
 28-2-19

M. F. B. 218.
 200M.—5-18.
 H. Q. 1772-39-113.

I.W.

(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.....

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) *Armouries Edmonton* *Ralph Bell* (Signature of Soldier.)

(Date) *4/2/19* *H. Meehan* (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)..... *Calgary, Alberta*.....

(Signature)..... *X. E. White capt.*.....

(Date)..... *21-2-19*.....

Officer i/c Discharge Section District Depot M. D. 13

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY OF

Surname BELL

Christian Name Ralph

2965

TABLE I. - General Table.

Birthplace { Parish London County Middlesex Examined { on 4th day of Sept. 1914 at Valcartier Declared Age 33 years Trade or Occupation Bricklayer Height 5 feet 9 inches Weight 154 lbs Chest Measurement { Girth when fully Expanded 37 inches Range of Expansion 2 inches Physical Development Fair Vaccination Marks { Arm RIGHT LEFT Number 3 When Vaccinated October 6th 1914. Vision { R.E.-V = L.E.-V =

TABLE III. - Boards; Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Table with 2 columns: Date, Brief Details and Signature. Entries include 10/14. Vaccination G. Poisson and 5/16.9.14. Inoculation M. C.A.M.C. with handwritten notes.

(a) Marks indicating congenital peculiarities or previous disease - (b) Slight defects but not sufficient to cause rejection -

Approved by E.A. Ulff Rank Capt. A.M.C. Medical Officer.

TABLE IV. - Service Table.

Enlisted { at Edmonton on 22nd day of August 1914

Table with 2 columns: Corps, Regl. No. Entry: 9th Bn., 18314

Became non-effective by on day of 191 (Signature) (Rank)

Table with 3 columns: Station or Troopship, Date of arrival or embarkation, Date of departure or disembarkation

TABLE II.—Only for admissions to Hospital or to the Sick List in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
M.B.C.H.	30	11	15	7	12	15	G.S.W. of Lt. Leg.	10	Wound still requires dressing.	L.C. Palmer
Mbl. Hos p. Herne Bay	7	12	15	7	1	16	G.S.W. Hip.	32	Shrapnel extracted from tensor fascia Healed	W.R. Rendell Lt. R.A.M.C.
Monks Horton Kent.	7	1	16	8	1	16	G.S.W? L.Hip.	2	Wounded in Belgium, at Festubert May 15th Paraded sick 30.11.15, with abscess in old shrapnel wound. Sent to M.B. Hospital, for 1 week then to Herne Bay for 4 weeks. Present Condition - Fit. Discharged 8.1.16. to 23rd Res. Bn. W. Sandling.	J.M. Eaton, Capt. CAMC.
<i>Unit was at Southampton</i>	<i>4</i>	<i>8</i>	<i>17</i>	<i>22</i>	<i>9</i>	<i>17</i>	<i>R.S.W. L. thigh</i>	<i>49</i>	<i>Same W. as above broken down again 14 days in discharge to Duty Docks, Southampton.</i>	<i>As per King C.M.P.</i>

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
EF 459 Year 1915 -1916	18314	Pte	Bell.	R.
	23 rd Res: Batt Canadians.	Unit.	A	Age. 34 Service. $\frac{16}{12}$ $\frac{16}{52}$
Station and Date. Hunco Bay Dec: 7 th 1915 Military Ho	Disease <u>Shrapnel wound Hip (Left, superficial).</u> Admitted from Thorncliffe with a discharging wound on flexor ^{extensor} surface upper 3 rd of thigh. Wound superficial. Piece of shrapnel in tensor fascia. W.R. Meredith L. Crane			
Dec: 12 th	Wound healing. W.R.M.			
" 17 th	Shrapnel removed under a general anesthetic. W.R.M.			
" 23 rd	Stitches removed. W.R.M.			
3 rd	Wounded almost healed. W.R.M.			
Jan 3 rd -16	Wound healed W.R.M.			
7 th	Discharged from Hoshitae to Canadian Convalescent Home W.R.M.			

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Rank Name Bell, Ralph. Reg'l No. 18314
 Unit 9th Battn. If in perm. Corps, }
 What Unit? } Married or Single Married.
 Place and Date of Enlistment Sept. 16th 1914. Place of Birth England.
 Name and Address, Next-of-Kin Mrs. R. Bell (Wife)
 20, John Street, Southampton, Hants. Relationship

Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship

of Cas.
 N/E. R.B. No 17890
 File R.L.
 Category **CAN. OR**
 Character
 27 JAN 1919 *Attached*

Discharge, Date and Place Reason
 1st page of record filled in envelope.

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.				
<i>C</i> 21-1-19	1st CORP	Permanent Grade <i>Pte.</i> <i>Ceases on Com. CDD</i> <i>& SOS to Canada</i>	<i>Pte. Witley</i>	9-1-19	<i>NIL.</i> D.O. 19

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				
10-1-19					TAKEN ON STRENGTH OF DISTRICT DEPOT 13, PART 2 ORDER NO. <u>24</u> <i>W. W. Masmyth</i> Lieut. Col. Officer Commanding District Depot No. 13
21-2-19					DISCHARGED FROM THE SERVICE BY DISTRICT DEPOT NO. 13, PART 2 ORDER NO. <u>D.O. 52</u> AUTHORITY <u>R.O. 1420</u> <i>W. W. Masmyth</i> Lieut. Col. Officer Commanding District Depot No. 13 Dated Ottawa 12-12-18. <i>W. W. Masmyth</i>

Casualty Form—Active Service.

Regiment or Corps 9th Aus Div

Regimental No. 18314 Rank PL Name Bell R.

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

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

Extended _____ Re-engaged _____ Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
<u>10-12-18</u>		Attached C.D.D. Buxton for return to Canada, Part 11 Order No. <u>292</u> Ceases to be attached C.D.D. Buxton on embarking for Canada.			<u>R.P. Dick</u> Lt. for Lt. Col. Commanding Canadian Discharge Depot.
<u>28-12-18</u>	<u>OLDW.</u>	<u>IOS from CORD.</u>	<u>K.P.C.</u>	<u>28-12-18</u>	<u>Pt II</u>
<u>8-1-19</u>	<u>✓✓</u>	<u>Depo C.C. Canada</u>	<u>—</u>	<u>8-1-19</u>	<u>Pt II-7</u> <u>A.C.M. Hanna Lt</u> <u>free</u>

(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.

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				

Transferred from 23rd Res Bn. to 12th Res Bn.

[Signature]
 LIEUT. & ADJT.
[Signature]
 ASST. ADJ. 12th RES. BATTALION C.E.F.

20.8.17 RECORD *Data on Strength 12th Bn* *908 (all to put auditing 19.8.17 DO 167*
 Contact Office

2.10.18 do *Account to all to Willey 27.10.18 DO 273*
 Contact Office

25.10.18 RECORD *On Comd 12th Willey 24.10.18 DO 296*
 Camp Ben *[Signature]*

24.10.18 *12th Res Bn attached 12th Res Bn.* Willey 24.10.18 *PC II 253*
 19.11.18 do *Cards to be attached* Willey 18.11.18 *PC II 275* *do Kenbury*

18/11/18 *1st C.O.R. Attd. Depot Coy.* Willey 18/11/18 *DO 320*
 Lieut i/c Records
 12th Res. Bn. C.E.F.

10.12.18 do *"ON COMMAND" 1st C.D.D., BUXTON* Willey 9.12.18 *DO 342*
[Signature]
 Lieut. i/c Records,
 1st C.O.R. Depot.

DUPLICATE.

Em. 9616
Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps 9th Reserve Battalion, C. E. F.,

Regimental No. 18314 Rank Private Name Bell, R.

Enlisted (a) 16.9.14 Terms of Service (a) Defn Service reckons from (a) 16.9.14

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) _____

Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		ORIGINAL UNAVAILABLE.			
9/5/15	OC. 3. Bn.	Taken on strength		26.4.15.	Part II. Order. No. 11. 9/5/15.
7.6.15.	OC. 4. General.	G.S. M. Luttock.	Lo. A.T. for England.	6.6.15.	#3034. 2. 81.
27.8.15.	Com. P.R.O.	Transferred to Eng'd.	Q. Cb. Mobil. Hosp. Shalvey.	6.6.15.	File. A. 21-7-3.
20.6.15	OC. 23	Taken on strength	Wlandring	8.6.15	
	1st Bn	Taken on strength.	Shorncliffe	26/4/16.	Part 2 CANADIAN SECTION G. H. Q. No 114.

(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.

13.

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) Bee, R
 REGIMENT 60th RANK 1st No. 18314
 Date of Examination in England Dec 15/18 Date of Examination in France _____

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



PRESENT DENTAL REQUIREMENTS

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

nil
nil

HAS HE EVER REFUSED DENTAL TREATMENT?

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

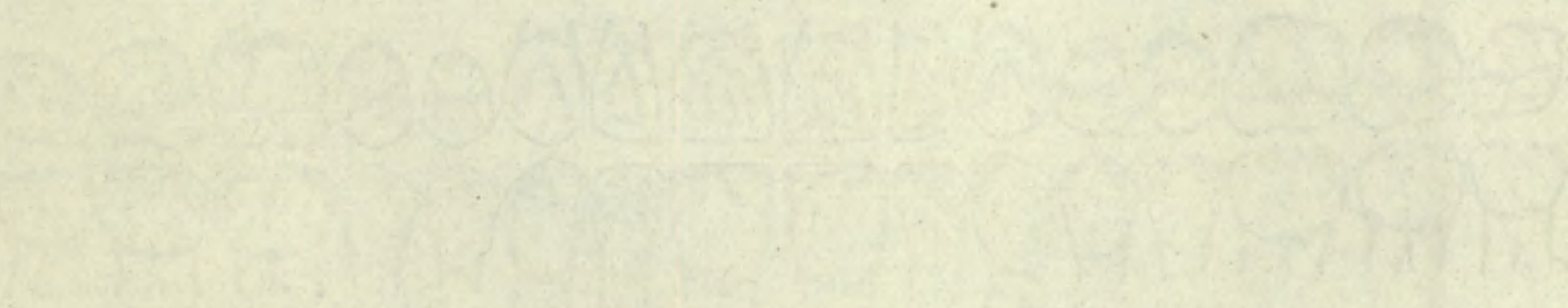
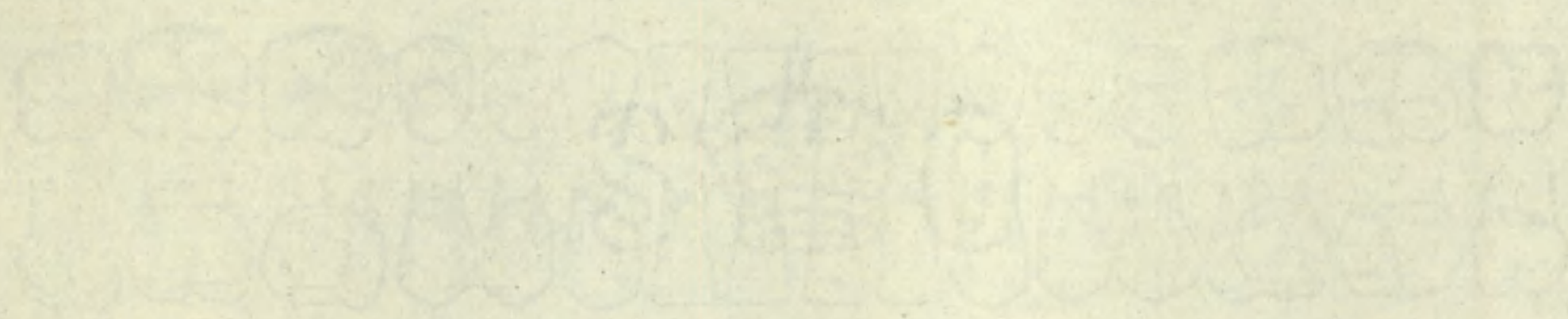
- (a) In Canada
 - (b) In England
 - (c) In France
- no*

Signature of Dental Officer *[Signature]* *Capt*

Handwritten scribbles at the top right of the page.

- (1) ...
- (2) ...
- (3) ...

- (4) ...
- (5) ...
- (6) ...



Faint, illegible text or markings located below the embossed rows.

REPUBLICAN MOB DEMONSTRATION
 ...

MILITIA AND DEFENCE
ASSIGNED PAY.

To whom *Mrs J. A. Bell.*
Address *20 John St.*
Southampton.

By whom assigned *Bell. R.*
Regtl. No. *18314.*
Rank *Pvt.*
Corps, &c. *Cainc 23Bw.*

ASSIGNED PAY SEPARATION ALLOWANCE
Rate *15.00 - 30.00*
Date to commence *1-12-18.*

ASSIGNED PAY AND SEPARATION ALLOWANCE
BRING PAID IN ENGLAND UNTIL ADVICE
FROM OFFICE OF DISCHARGE OF SOLDIER
NAMED HEREIN.

PAYMENTS

Month.	Year.	Cheque No.	ASSIGNED PAY Amt.	SEPARATION Deduction.	REMARKS.
Jan	<i>1916</i>				DISCHARGED TO CANADA. <i>30-11-18. 1 CORP.D. 15 20/11.</i>
Feb.					
Mar.					
April					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.		<i>1917</i>	<i>621423</i>	<i>75</i>	
	<i>E47411</i>		<i>15</i>	<i>30</i>	
Jan	<i>E94203</i>		<i>15</i>	<i>30</i>	
Feb.	<i>450895</i>		<i>15</i>	<i>30</i>	
Mar.	<i>Stop Disch 20/2/19.</i>				
April	<i>Auth Cante 352 4/3/19.</i>				
May					
June					
July					
Aug.					

ASSIGNED PAY.

By whom assigned

Regtl. No.

Month.	Year.	Cheque No.	Amount.	Pay Sheet.	REMARKS.
Sept.	1917				
Oct.					
Nov.					
Dec.					
Jan.	1918				
Feb.					
Mar.					
April					
May					
June					
July					
Aug.					
Sept					
Oct.					
Nov.					
Dec.					
Jan.	1919				
Feb.					
Mar.					

WAR SERVICE GRATUITY and SEPARATION ALLOWANCE

Payable to 19314 BELL, R.

Dependent

Address 20 John St., Southampton,
Hants, Eng.

Address

Date	Cheque No.	Gratuity	Payments	Balance Due.	Remarks
1919		71 18 4			
May 15	13803		28 15 4	43 3	✓ Grat
June 20	26453		14 7 8	28 15 4	
July 15	43163		14 7 8	14 7 8	✓
Sept 15	69781		14 7 8	0	✓
		71 18 4	71 18 4		

МАЪЗ ЗЕБАЛСЕ СВЯЖИЦА БИЧ ЗЕБАВАЦИОН АГЛОМАЦИСЕ

1977-80

Генерал

Ветеринар

Лаборатор

Сектор

Сектор

Директор

Адрес

Улица

Адрес

Улица

1977-80

WAR SERVICE GRATUITY and SEPARATION ALLOWANCE

Payable to BELL, Annie Dora

Dependent 18314 Pte Bell, R.

Address 20 John St., Southampton,
Hants, England.

Address

Date	Cheque No.	Gratuity	Payments	Balance Due.	Remarks
1919		30 16 5 ✓			
May 15	13802		12 6 7 ✓	18 9 10 ✓	S.A.
June 20	26452		6 3 3 ✓	12 6 7 ✓	
July 15	43162		6 3 2 ✓	6 3 4 ✓	
Sept 15	69776		6 3 4 ✓	0 ✓	
		30 16 5 ✓	30 16 5 ✓		

МАРЪ СЕРВИСЕ СВЯТЛИЦА И ПЪРЪ СЕРВИСЕ МАШИНИ

Име на клиента

Име на фирмата

Адрес

Сметка

Сметка №

Дата

Име на клиента

Име на фирмата

МАРЪ СЕРВИСЕ СВЯТЛИЦА И ПЪРЪ СЕРВИСЕ МАШИНИ

Съставено на

NAME BELL, Ralph

Regimental No. 18314 ✓

Name and address of next-of-kin

Unit 9th Battalion
23rd

Mrs. E. Bell,

Date of enlistment Sept. 16th, 1914

45 Charles St., Forest Lodge,

Place of birth England

Sydney, Australia

Married (yes or no) No

Date and place discharged

Amount of pay assigned monthly \$

Reason for discharge

To whom payable

Character on discharge

Date		PAY		Field Allowance		Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days			Rate	Amount					
Sept 22	Oct 31	40	1 ⁰⁰	40 ⁰⁰	40	10	4 ⁰⁰			30 ⁰⁰			30 ⁰⁰	
Nov 1	Nov 30	30	1	30	30	10	3 ⁰⁰	14 ⁰⁰	147	47			47	
Dec 1	Dec 31	31	1	31	31	10	3 ¹⁰			34			34	
Jan 1	Jan 31	31	1	31	31	10	3 ¹⁰	10	2420	20			20	
1 Feb	28	28	1	28	28	10	2 ⁸⁰	420	35	35			35	
17 March	31	31	1	31	31		3 ¹⁰			24			24	
1 Apr	30	30	1	30	30		3 ⁰⁰	410	2710	15			15	Trans. 3rd Bn 30/4/15
1/5	31/5	31	1	31	31		3 ¹⁰	2210	6620	6			6	
1/6	30/6	30	1	30	30		3	5020	8320					
1/7	15/7	15	1	15	15		1 ⁵⁰	8320	9970	30			30	transf. to 20 Bn 15/7/15
July 16	31	16	1	16	16	10	1 ⁶⁰	970	8730	257				S.F. 9-16/7/15
							9114							Exchange
							685							
Aug 1	31	31	1 ⁰⁰	31	31	10	3 ¹⁰	97.99	13209	487			487	
Sep 1	30	30	1 ⁰⁰	30	30	10	3	12722	16022	6569			6569	
Oct 1	31	31	1 ⁰⁰	31	31	10	3 ¹⁰	9453	12863	5839			5839	
Nov 1	30	30	1 ⁰⁰	30	30	10	3	7024	10324					
Dec 1	31	31	1 ⁰⁰	31	31	10	3 ¹⁰	10324	13734					
Jan 1	31	31	1 ⁰⁰	31	31	10	3 ¹⁰	13734	17144	1594	5840		8273	
							497	497	4970	1069	2433		46868	
							8871							

23rd

18314.

Bell, Ralph

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					
Bylt. Iowa		497		497			4970	1069	55739			46868				
Feb	1. 29	29	100	29	29	.10	290	8871	12061	1758		2434			2434	
Mar	1. 31	31	100	31	31	.10	310	9627	13037	1934		1703			1703	
								11334								
BALANCE TRANSFERRED TO NEW LEDGER.																
Carra Iowa to New Ledger				557			5570	1069	62339			51005			51005	Cr Bal. 113.34

W.A.

Ward Ward 3 Hospital _____
No. of Bed _____ Date _____

Regl. No.	Rank and Name	Corps	Part to be X-Rayed
18314	Pte Beale	3 rd Bn. Canadian Inf.	Left thigh. (streptococcal wound)

SHORT HISTORY OF CASE.
(To be completed by M.O. i/c case.)

Has had several operations & wound is painful again

REPORT ON RESULT OF X-RAY EXAMINATION.
(To be completed by Radiographer.)

No. of Plate 1071

Plate shows F.B. over great trochanter.

Signed J. A. Peters

Signature of M.O. _____
Date 4/8/17

Signature of Radiographer [Signature]
Date _____

LOCAL CARD

*Name **BELL Ralph.** Rank **Pte** Regtl. No. **18314**
 Orig. unit **9th.** Present unit **1st C.O. R. D.M. or S. S.** Age **38** Religion **C of E**
 Fyle Depot **I 3. D. B-414** Ref. H.Q. _____

Place, and date of arrival **Halifax. Olympic. 17-1-19.**

Next of kin **Mrs. Bell Wife. 20-John St Southhampton. En.**

Address on leave **Edmonton Hotel Edm.**

Address on discharge **G.W.V.A. Edmonton Alta**

Transportation issued Yes No Date _____ Character on discharge _____

Previous occupation **Bricklayer.** Date and place of enlistment **12-8-14. Edm.**

Diagnosis **(1) G.S.W. left Hip (2) Defective Hearing** Date of Medical Boards **7-2-19**

Date. I.O.S.	Remarks	Pt. 2 Order No.
10-1-19.	Posted to Cas Co. Edmonton. 23-1-19.	24
	Granted leave with subsistence to 6-2-19.	24
21-2-19	Discharged from H.M. Service	52

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

Unit 3rd Bn. Canadian Inf.
"A"
 Squadron, battery or company

MORNING SICK REPORT
 MEDICAL INSPECTION REPORT*

Army Form B 256

Station and Date Southampton Docks 29-8-1918

Regtl. No.	Rank and Name (Christian name in full; Surname first; M under name if married.)	Completed Years of		Religion.	If for duty †	Whether a defaulter.	Lines or barracks.	Room.	Disease	Disposal. Medical Officer's Remarks and Signature.
		Age.	Service.							
18314	Pte Bell R.	36	4	Co. C.	Discharged Hosp. <u>yesterday</u>				in Hospital Ran Dix top Dix top	FREE FROM INFECTION! GAB DAPT, R.A.M.C. M.O. 1/a TROOP DOCKS. SOUTHAMPTON. J. J. Warkins Orderly N.C.O.

† State nature of duty for which warned. In the case of men for medical inspection, the reason, such as, "Soldiers for trial by Court-Martial," or "joining the station," &c., should be stated against their names.
 * Strike out whichever is not applicable.

To be Discharged from Hospital to-morrow.

Unit.	Squadron, battery, or company.	Regtl. No.	Rank and Name.	

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.	Southampton University Hosp. University War. Southampton .	4-8-17 27-7-18.
2.		
3.		
4.		
5.		
6.		
7.		

c. 2. 31-1-17 #5.
8-8-17 122
2.8.18 6281 ①
22-1-19. CH24 Disch 28-8-18.

Surname **Bell** Christian Name or Names **Ralph** Reg. No. **18314**
 Rank **Plt** Unit **3rd Bn. 12th Res.** Co. **1st.** Troop **B.O. Depot.** Batty
 Hospital **No. 4 Gen. Versailles** Date of Admission **28.5.15**
 Transferred **Queen Mary's Mil.** Hosp. **8.6.15**
Moore Barracks Shorncliffe Hosp. **30.11.15**
Convl. Bearwood, Wokingham, Hosp. **2-9-16.**
Shorncliffe M.C. Hosp. **5-10-16**

Diagnosis
 (1) **Wounded**
 Later Diagnosis (if changed)
 (2) **G. S. W. Lower extrem.**
 (3) **G. S. W. Hip**

Additional Diagnosis: if more than one state present
abscess Lt. Thigh.
Wd. L. Thigh. (old) gt
Y.S.W. L. Thigh. old. lb

DISPOSITION **Sick Furlough** Date **9.7.15**
Drach. **7.12.15**

REMARKS
Ch. 78
Ch. 7.6.15 82(2)
WR. 11.6.15
WR. 19.6.15
WTR 25.6.15
WTR. 2.7.15
WTR 9.7.15
Ch. 12.7.15 105
Ch. 23.7.15
Ch. 10.1.16 253
Ch. 2.9.16 B147
- 9-9-16 85-

A.M.D. 2 Troop.
 Dept. of D., G., M.S., D., M.F.C. London

over

RW

CANADIAN CONVALESCENT HOSPITAL,

AT

*1 Bent Wood, Wokingham, Berks.***A. & D.
CARD.**Regt. No. *18314*A. & D. No. *4361*Rank *Pte*Corps *3rd* — *2nd Res. S.*Name *Bell R.*Age *35*Religion *OC.*Service at Home *20/12*" " Front *4/12*Diagnosis *Abscess L. tooth.*Admitted *31 AUG 1916**1 SEP 1916**R. Vic Hos. Netley*Discharged *Duty Via**Mil Hoop Thorncliffe*Place in Hospital *233D**5-10-16*

M. H. Rec'd

(See Document card)

Transferred

Results

History given by patient - 26/9/16

REMARKS:

Wounded 24th May 1915.

Boarded at Gibraltar in Aug. or Sept. 1915. Night duty

~~Placed~~ at that time attached to 23rd Batt.

Attached to M.C.O. Folkestone Nov. 1915.

admitted to M.B.H. at end of Nov. -

discharged from Hosp. at Jan. & ~~was~~

reported M.C.O. Folkestone. Service suspended at

Folkestone & sent to Southampton May 1916.

Hit again in wound & admitted to hospital Aug. 3rd

S.I. Opn. (had wound on 24th May 1914)

Abcess formed on wd twice, almost healed

S. C. Good

As P.D.

SURNAME.

Bell

Deceased. D.M.S.

13

CARD NO. 4

CHRISTIAN NAMES

Ralph.

arriv. 30.5-25

508.21.2.19. Demol
10.0.52 / 1502 / 19 / 1300

REGL. NO.

18314

RANK

Pte.

Essev. 5.6.25

UNIT

9th.

Ben

FORMER CORPS

nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Bell Mrs. E. R (Wife)

REI

AD

20 John St.
Southampton, Eng.

e

54-21-38-1. 30/8/18

COUNTRY OF BIRTH

England, Highgate.

DATE Mar. 28th. 1881.

PLACE OF ATTESTATION

Valcartier P.Q.


DATE Sept. 23rd. 1914.

R/C. 17-1-19. 25.4 / 173. 13

L. L. 6945. M. & D. 6994.

0/5.4-10-14

M. F. W. 22. 100M.-8-16. H. Q. 1772-39-339.

From Quebec per  S.S. Zealand 4-10-14

MARRIED

SINGLE *yes.*

WIDOWER

TRADE OR CALLING Bricklayer RELIGION Church of England

DESCRIPTION.

APPARENT AGE 33 YEARS 6 MONTHS

HEIGHT 5 FEET 9 $\frac{3}{4}$ INCHES

CHEST MEASUREMENT 36 $\frac{1}{2}$ INCHES EXPANSION 3 $\frac{1}{2}$ INCHES

COMPLEXION Medium EYES Blue HAIR Brown.

DISTINGUISHING MARKS Tattoos "Hands clasped across
Heart. A.S. on left fore-arm.

MEDICAL EXAMINATION. PLACE Valcartier P.Q. DATE Sept. 1914.

Present Address. Not stated.

87 12 1/2
P

~~A~~
~~V~~

Number... 18314 ... Rank... Plt

Surname... BETH

Christian Names... Ralph

Unit... 3rd Bn. Can. Inf. Theatre of War... France

Dates of Service... 17-10-14 - 26-4-15 - 9-1-16

Remarks...

Latest Address... ~~4 W. 4th St. Edmonton~~

21 Mayfield Rd., Hampton Park, ~~Alto~~

Roll No. 13 Southampton, Hants, Eng.

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DESP. JAN 28 1922

REGN. No. 8114

NAME *Bell, Ralph.*

H. Q. FILE No. 649- ✓

REGT'L. No. *18314* ✓

RANK AND CORPS *Pte. 3rd Batt. (Form: 9^a)*

CABLE

NATURE OF CASUALTY

NO.

DATE

NO.	DATE	NATURE OF CASUALTY
<i>C. 2173</i>	<i>10/6/15</i>	<i>Admitted to 4 Gen. Hosp. Versailles. May 28th (G. S. W. buttock.)</i>

NO. *1128.*

FOLL.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
78	No. 4. Gen. H., Versailles	28-5-15	G. S. W. Buttock ✓
82	Queen Mary's Military H., Whally	8-6-15	Wounded, slight. ✓
105	Q. Mary's Mil., Whally, Lanc. Dis. to Sick Fulbough.	9-7-15	
253.	Moore Barr., Shorne.	30-11-15	g. s. w. hip.
73148	discharged.	7-12-15	" " " "
185	Can. Conv. Bear Wood Wokingham	2-9-16	Abscess Lt. Thigh
57	Snail Thorncliffe	5-10-16	Abscess Lt. Thigh
122-	University Southampton	4-8-17.	Old. Wd. St. Mqn -

NAME

Bell. R.

REGT'L. No. 18314
H. Q. FILE No 649

RANK AND CORPS

Pte.

(Alpo.) 1st C. O. R.

FOLLOWS

No.

FOLLOWS

CABLE

NO.

DATE

NATURE OF CASUALTY

Reg. No. <i>314</i>	Rank <i>Pte</i>	Surname <i>Bell</i>	Category.	Dentally Unfit.
		Christian Names (1) <i>Ralph.</i>	Date <i>31/1</i>	
Place of Enlistment:	Date of	Taken on from	Religion	Inoculations
Province:	Age on	Date		Vaccination
On Command.....	Hospital.....		Permanent Cadre	Employed as
			Date taken on	
Date Proceeding	Date Admitted			
Record of Overseas Service:			Profession or Trade (Civil)	
Reason for Return:			Transferred or Posted to	
			Date.....	
Married or Single	LEAVE.			
Address of Next of Kin.....	No. of Pass Issued.	FROM.	To.	Free Transportation.
		<i>2.4.18</i>	<i>8.4.18</i>	<i>Yes.</i>
		<i>18.10.18</i>	<i>23.10.18</i>	<i>Yes.</i>
Country				

Name *Bell. Ralph. Pte.*Reg. No. *18314.*Unit *12th Batho.*Next of Kin *W. E. Bell.
45 Charles St. West Lodge Sydney Australia*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
<i>1916</i>						
<i>2-9</i>	<i>Can bon Hsp</i>	<i>Beaumont</i>	<i>Abcess</i>	<i>185</i>		
<i>5-10-16</i>	<i>Tr. mil.</i>	<i>Stone cliffs</i>	<i>alright. High</i>			
			<i>ht Thigh.</i>	<i>5</i>		
<i>Aug 4</i>	<i>University Hsp</i>	<i>Southampton</i>	<i>Old Wd L</i>	<i>Thigh</i>	<i>122</i>	

X

Name **Bell R.**Rank **Pte.**Reg. No. **18314**Unit **Third Battalion.**Next of Kin *M^{rs} E. Bell, 45 Charles St., Forest Lodge,
Sydney, Australia*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1915	Q.M. Mil. Hosp. Whalley-Dis. to	S.F.		104		
30 11	Moore Bks. Hospital	Shorncliffe	G.D. Sig.	253		
4.12.15	Discharged. See 12 th Rea Br.		do.	B149		

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List

MOORE BARRACKS, CANADIAN HOSPITAL, SHORNCLIFFE.

ADMITTING CARD.

Regt. No. 18314

A. & D. No. 7843

Rank Pte

Name Bell R.

Corps 23rd Batt A

Religion Cop &

Age 34

M. H. Rec'd a

M. H. Requested

M. H. Ret'd

Disease Gun shot wound in Left Hip.

Admitted Nov 30th 1915

Discharged

Place in Hospital /

Transferred U.A.D. 7-12-15

Results

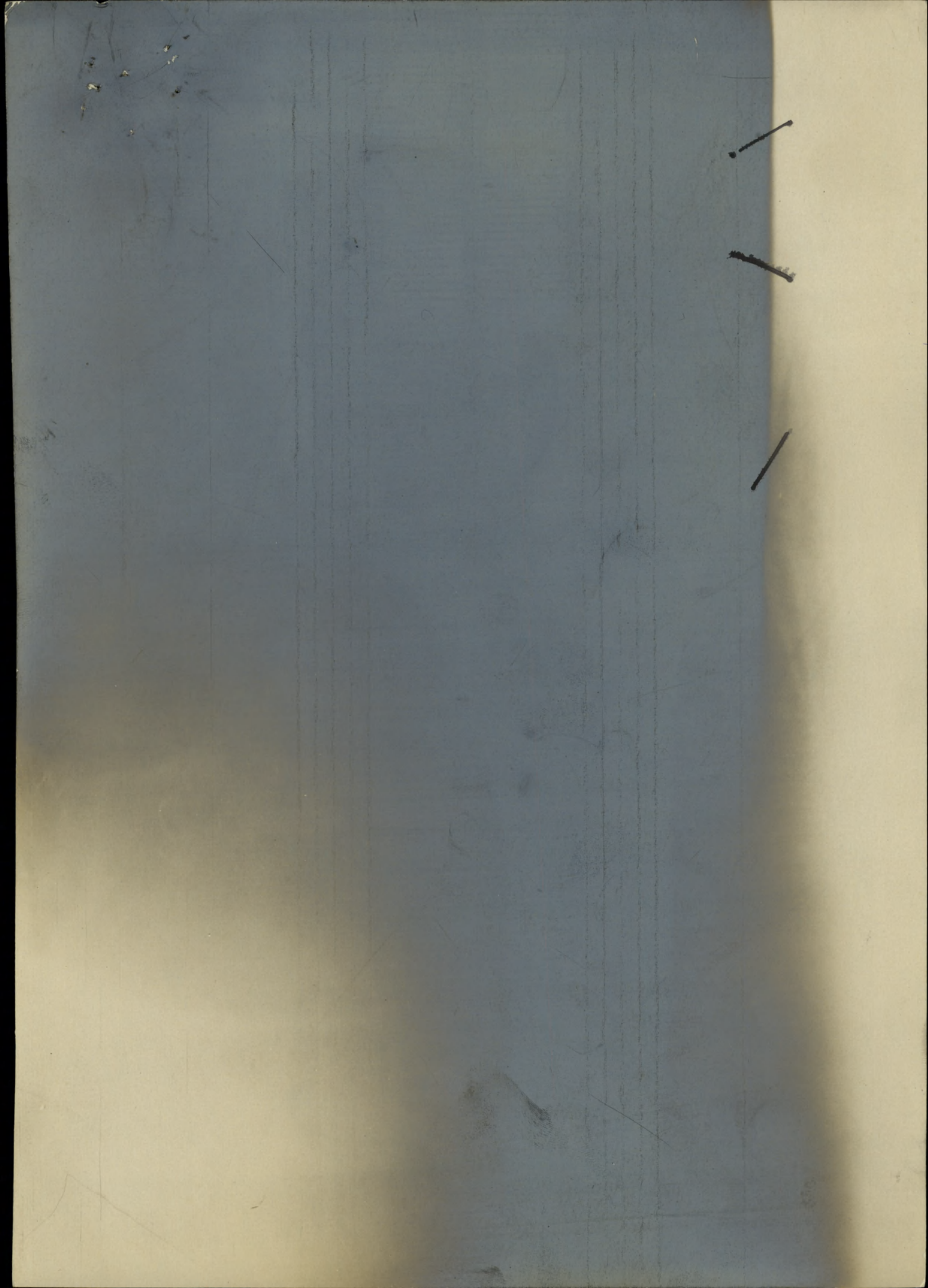
¹⁶/₁₂ Edmonton

no

yes

P.T.O.
2.20 pm

REMARKS:



X-RAYS R.V. Hospital NETLEY.

Regt. No. 18514.

Name Olt Bell

Regt. or Conditions

on

3 u. 4-8-16

Lt. Hiji:

u 6203

One small M.F. at level of Lgt Trochanter
 : collection of several M.F's about Trochanter

No Congestion:

(Print too dark: another follows)

[Handwritten signature]

R. A. M. C.
 I/c X-Rays
 R.V. Hosp! Netley.

Lt. Steiner

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number of Days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital must be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer.
	Day	Month	Year	Day	Month	Year				
<i>Netley</i>	<i>13</i>	<i>8</i>	<i>16</i>	<i>29</i>	<i>8</i>	<i>16</i>	<i>IX, 1 Abscess of thigh (secondary)</i>	<i>27</i>	<i>W. W. 7 left thigh received in action in France 24.5.16. Wounds healed. Abscess formation in R. leg. Evacuated under anaes. ether. Wound clean & granulating. 22.8.16 See for Am. Hosp. 3 etc. To Canadian Genl. Hosp.</i>	<i>D. Sheppard</i>
<i>20th Genl. Hospital Bearsden Wood.</i>	<i>1</i>	<i>9</i>	<i>16</i>	<i>5</i>	<i>10</i>	<i>16</i>	<i>abscess thigh</i>	<i>35</i>	<i>Discharged to Duty Thorncliffe</i>	<i>J. Briggs Capocome</i>

MAJOR, R.A.M.C.
OFFICER IN CHARGE,
SURGICAL DIVISION R.V.H.

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
M.B.H.	50	11	15	12	15		G.S.W. of Left Hip	10	Wound still requires dressing	H. Palmer
Mil. Hos. Herne Bay	7	12	15	7	1	16	G.S.W. Hip	32	Shrapnel struck from trench. Healed	W.R. Russell, Lt. Col.
Monks Horton, Kent.	7	1	16	8	1	16	G.S.W. L. Hip	2	Wounded in Belgium, at Festubert May 15th. Paraded sick 30.11.15 with abscess in old shrapnel wound. Sent to M.B. Hospital for 1 week, then to Herne Bay for 4 weeks. Present Condition:- FIT. Discharged 8.1.16 to 23rd Res. Battn. W. Sandling.	J.M. Eaton, Capt. C.A.M.C. <small>Examine Medical History; heat sent to here. Medical Registrar Record Office.</small>

M. OR S. *Married* ✓

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

REGT. No. *18314* RANK *Pte* NAME (IN FULL) *BELL RALPH.*

ORIGINAL UNIT C.E.F. *canac* IF IN P.F. WHAT UNIT? (BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY \$ *15.00* DATE EFFECTIVE *1-12-18*

PAYABLE TO *Mr. Dona A Bell* RELATIONSHIP *Wife* ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS *20 John Street Southampton*

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE DATE REASON AUTHORITY IF ENTITLED TO POST DISCHARGE PAY

CALGARY, ALTA. FEB 2 1918

BALANCE FROM PREVIOUS ACCOUNT

MONTH	PAY AND F.A.			OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGIMENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT			COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3					DEBIT	CREDIT	
<i>30/11/18</i>					<i>257 16</i>													<i>Ci 257 16 Eng & Pte</i>
<i>1/12/18</i>					<i>257 16</i>													
<i>21/2/18</i>	<i>83</i>	<i>1¹⁰</i>	<i>91 30</i>	<i>12 00</i>	<i>119 25</i>								<i>9 00</i>	<i>30 00</i>	<i>15 00</i>			<i>Recd SA 9⁰⁰ 22 Feb 1918 per pay by Eng. 21 30⁰⁰ G.P. Paid Eng. Dec. 1 Jan. 1918 2024 Subsistence 15 Jan 1918 231119-4209 3500</i>
			<i>91 30</i>		<i>138 30</i>													<i>258 25</i>
			<i>91 30</i>		<i>1257 16</i>													<i>258 25</i>
					<i>1395 46</i>													<i>137 21</i>
																		<i>119 25</i>
																		<i>204 25</i>
																		<i>5 00 30 00</i>
																		<i>153 67 28 29 21 4 87</i>
																		<i>54 - 395 46</i>
																		<i>WAR SERVICE GRATUITY</i>
																		<i>183 days</i>
																		<i>1420 180 600</i>
																		<i>70 30 100 - 350 150</i>
																		<i>70 30 100 - 280 120</i>
																		<i>70 30 100 - 210 90</i>
																		<i>70 30 100 - 140 60</i>
																		<i>70 30 100 - 70 30</i>
																		<i>70 30 100 - 0 0</i>
																		<i>1420 - 180 - 600 - 1420 - 180 - 600</i>

W.S.G.
521
Gratuity M. D. 19

ASSIGNED PAY. EFFECTIVE DATE: <i>1/4/18</i> AMOUNT: <i>300</i>	ENGLAND OR CANADA.	SEPARATION ALLOWANCE. EFFECTIVE DATE: <i>6/4/18</i> AMOUNT: <i>25.00</i>	ENGLAND OR CANADA.	NAME: <i>BELL Ralph</i> NUMBER: <i>18314</i>
--	--------------------	--	--------------------	---

NAME, ADDRESS, RELATIONSHIP & AUTHORITY <i>Mrs Dora A Bell</i> <i>20 John St Southampton (wife)</i>	WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE. <i>Same</i>	AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT <i>Private</i>
---	--	-----------	----------------	---------------------------------------

UNIT AND TRANSFERS

ORIGINAL UNIT: *23rd Bn*

DATE ACCOUNT FIRST OPENED: -

AUTHORITY	DATE EFFECTIVE <i>1/1/17</i>	DATE LEASER SHEET T' SPD	UNIT TRANSFERRED TO <i>banked Cdn Sec</i>
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EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
<i>15.11.18</i>	<i>3114</i>	<i>12th Bn 5-0-0</i>	<i>2433</i>	<i>21.11.18</i>		<i>Edwin Bell</i>	<i>281.49</i>
						<i>Extract</i>	<i>24.33</i>
						<i>L.P.C. Bell</i>	<i>257.16</i>

PARTICULARS OF RENDERING NON-EFFECTIVE: *1st. Com 1st. COOR 20/11/18: 15. 30. 11. 18*

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<i>March</i>	<i>Bal Forward</i>								<i>373.72</i>	<i>75.00</i>	
<i>April</i>	<i>P.P.</i>	<i>33</i>		<i>A 8397. £ 3-1-8-</i>			<i>15-</i>		<i>358.72</i>		
				<i>MR 86 6 PM. 2/4/18 a3</i>	<i>97.33</i>				<i>294.39</i>		
		<i>33</i>		<i>S.C.A 2718 £ 4-5-7 SA 6/4/18 to 30/4/18</i>	<i>97.33</i>		<i>15-</i>		<i>294.39</i>		<i>20.83</i>
<i>May</i>	<i>Pie Pay</i>	<i>34.10</i>		<i>A 92351 £ 8-4-5</i>			<i>15-</i>		<i>328.49</i>		<i>25-</i>
		<i>34.10</i>					<i>15-</i>		<i>313.49</i>	<i>75</i>	<i>25-</i>
<i>June</i>	<i>Pie Pay</i>	<i>33-</i>		<i>B 32975 £ 8-4-5</i>			<i>15</i>		<i>346.49</i>		<i>25-</i>
		<i>33</i>		<i>MR 12109: 5/6/18 a2</i>	<i>24.33</i>		<i>15</i>		<i>331.49</i>	<i>75</i>	<i>25</i>
		<i>34.10</i>			<i>24.33</i>		<i>15</i>		<i>307.16</i>		<i>25</i>
<i>July</i>	<i>P.P.</i>	<i>34.10</i>		<i>B 99181 8-4-5</i>			<i>15</i>		<i>341.26</i>		<i>25</i>
		<i>34.10</i>		<i>MR 21570 29/7/18 a13</i>	<i>48.67</i>		<i>15</i>		<i>326.26</i>		<i>25</i>
		<i>34.10</i>			<i>48.67</i>		<i>15</i>		<i>277.59</i>		<i>25</i>
<i>Aug</i>	<i>P.P.</i>	<i>34.10</i>		<i>C 49624 8-4-5</i>			<i>15</i>		<i>341.26</i>		<i>25</i>
		<i>34.10</i>					<i>15</i>		<i>296.69</i>		<i>25</i>
<i>Sep</i>	<i>P.P.</i>	<i>33</i>		<i>D 17630 8-4-5</i>			<i>15</i>		<i>314.69</i>		<i>25</i>
		<i>33</i>		<i>MR 11120 Nov 1918: 23rd Bn a11</i>	<i>H 87</i>		<i>15</i>		<i>309.82</i>		<i>25</i>
		<i>33</i>			<i>H 87</i>		<i>15</i>		<i>277.59</i>		<i>25</i>
<i>Oct</i>		<i>34.10</i>		<i>E 20358 8-4-5</i>			<i>15</i>		<i>328.92</i>		<i>25</i>
		<i>34.10</i>		<i>MR 1562 12/10 3 Res. a42</i>	<i>2.43</i>				<i>326.49</i>		
				<i>2331 20/10 " 50</i>	<i>48.67</i>				<i>277.82</i>		
				<i>2912 29/10 12" 57</i>	<i>24.33</i>				<i>253.49</i>		
					<i>75.43</i>		<i>15</i>		<i>253.49</i>		<i>25</i>

CANADIAN ASSIGNED PAY AUDITED
 ADDIT CLERK
 DATE *7/6/19*

18314
 Reg. No. *18314*
 Rank *Plt*
 Name *BELL R*
 Extract D.O. No. *17*
NOT RECORD
 Date: *21.1.19*
 Struck off Strength of O.M.F. of C. on transfer to C.E.F. Canada.
 Acted on Ledger Clk. *9.1.19*

Strike out whichever inapplicable.

ASSIGNED PAY. ENGLAND OR CANADA. SEPARATION ALLOWANCE. ENGLAND OR CANADA. NAME: **BELL Ralph**
 EFFECTIVE DATE: **1/4/18** EFFECTIVE DATE: **6/4/18 1.9.18** NUMBER: **18314**
 AMOUNT: **5.00** AMOUNT: **25.00**

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 Dora A Bell
20 John St Southampton (wife) *Same*
 stopped off 1.12.18

UNIT AND TRANSFERS
 ORIGINAL UNIT: **23rd Bn**
 DATE ACCOUNT FIRST OPENED: **1/4/17**
 AUTHORITY: **banked**
can see

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
15.11.18	3114	12th Bn 5-0-0	2433	21.11.18		<i>Adm Bal</i>	28149
						<i>Extract</i>	2433
						<i>L.P.C Bal</i>	25716

PARTICULARS OF RENDERING NON-EFFECTIVE: **Mr. Carr 1st COOR 20/11/18: 15. 30.11.18**

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
March 31	Bal Forward								37372	75 00	
April	P.P.	33		A 8397 £ 3-1-8-			15		35872		
				MR 86 6 PM. 2/4/18 a3	97 33				34172		
		33		S.C.A 2718 £ 4-5-7 & 6/4/18 to 30/4/18					29439		20 83
					97 33		15		29439		20 83
May	P.L. Pay	34	10	A 92351 £ 8-4-5			15		32849		
							15		31349	75	25 -
		34	10						34649		25 -
June	P.L. Pay	33		B 32975 £ 8-4-5			15		33149		25 -
				MR 12109: 5/6/18 a2	2433				30716	75	25
		33			2433		15		34126		25
July	P.P.	34	10	B 99181 8-4-5			15		32626		25
				RM 21570 29/7/18 a13	4867				29759		25
		34	10		4867		15		34126		25
Aug	P.P.	34	10	C 49624 8-4-5			15		29669		25
							15		31469		25
Sep	P.P.	33		A 17630 8-4-5			15		30982		25
				MR 11120 1/15: 23rd Bn a11	487				30982		25
		33			487		15		32892		25
Oct	P.P.	34	10	C 20358 8-4-5			15		32649		25
				MR 1512 12/10 3 Pcs. a42	243				27983		25
				2331 20/10 " 50	4867				25349		25
				2912 29/10 12" 57	2433				25349		25
		34	10		7543		15		25349		25

CANADIAN ASSIGNED PAY AUDITED
 AUDIT CLERK
 DATE: **9/6/19**

Date Checked

NUMBER 18314 RANK *Pte* NAME BELL *Ralph*

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<i>Oct</i>	<i>Pay</i>								25349		
<i>Nov</i>		<i>33</i>		<i>Supp D 76687 Nov 11-6-1</i>			<i>15</i>		27149		<i>40</i>
	<i>Ent. of Pay</i>	<i>10</i>		<i>1 end in SPC</i>					28149		
				<i>M/10480 25/11 C-90 26</i>	<i>4867</i>				23282		
				<i>M/3114 15/11 12 Dec 51</i>	<i>2433</i>				20849		
				<i>M/5264 16/12 C-82 83</i>	<i>4867</i>				15982		
		<i>43</i>			<i>12167</i>		<i>15</i>				<i>40</i>