

- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers..... 2
- Declaration of change of name.....
- Authority for special assignments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet.....
- Compulsory Stoppages.....
- Casualty Forms..... 1
- Proceedings on discharge.....
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate.....
- Medical Report for Invalids.....
- Medical History Sheet..... 2
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet.....
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate.....

Officers
DISCHARGE DOCUMENTS

R. O. No.
H. Q. No.

I

M

Name **BAKER GEO. HAROLD**
Regt. No. _____ Rank **St. Col.**
Corps **3rd C.M.R.**

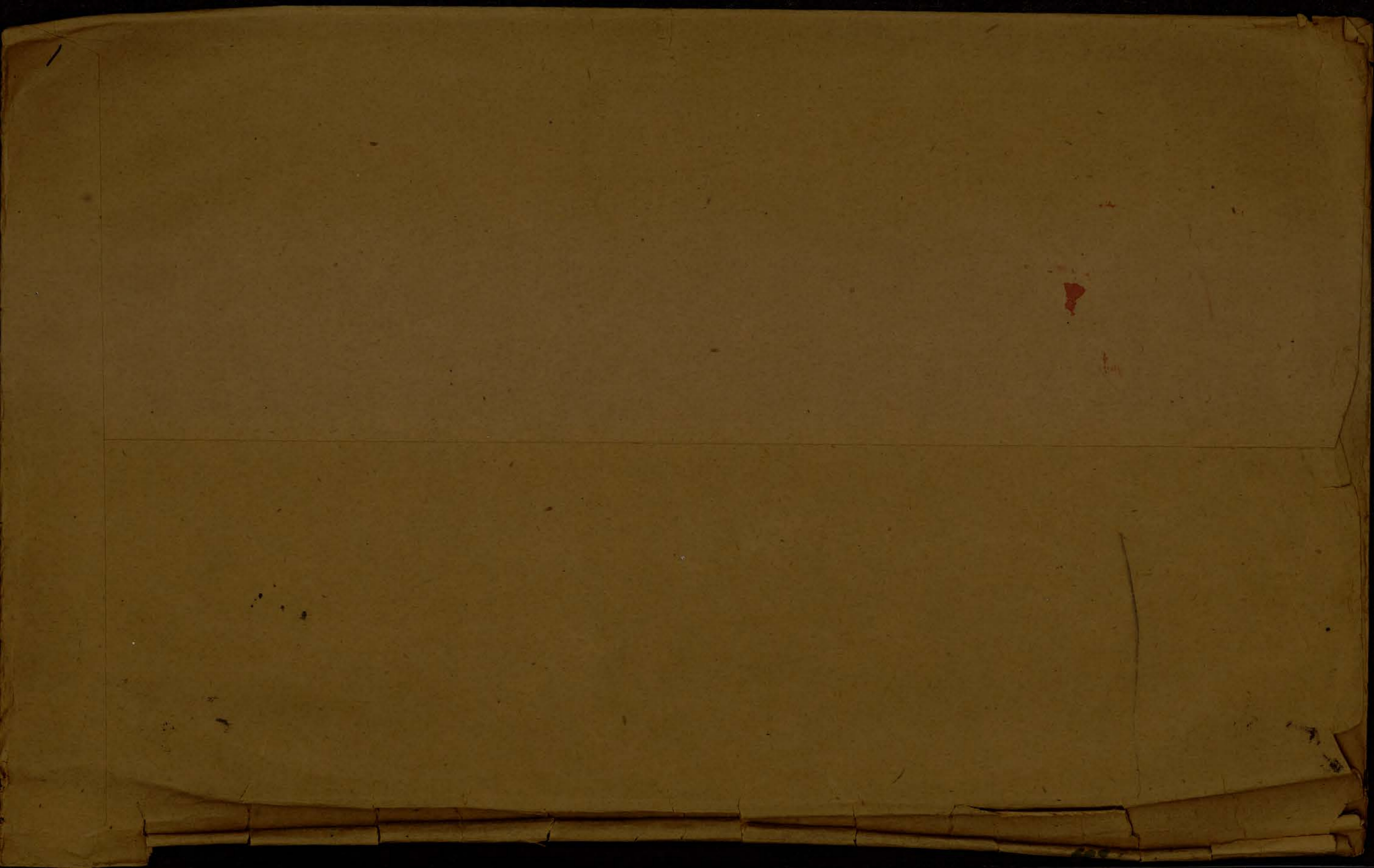
Do of W 3-6-16

H

1
9.19
9.19
11-19

*M.X.
6/12/19
made*

Smith



ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- 1. What is your name?..... George Harold Baker
- 2. In what Town, Township or Parish, and in what Country were you born?..... Village of Sweetsburg, Missisquoi Co./ P.Q.
- 3. What is the name of your next-of-kin?..... Miss Effie Baker
- 4. What is the address of your next-of-kin?..... Bolton Centre, P.Q.
- 5. What is the date of your birth?..... 4th November 1877
- 6. What is your Trade or Calling?..... Advocate
- 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?..... Yes
- 10. Have you ever served in any Military Force?.. Militia of Canada
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?.....

George Harold Baker (Signature of Man).
J. R. Munroe (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, George Harold Baker, 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.

George Harold Baker (Signature of Recruit)
J. R. Munroe (Signature of Witness)
 Date..... 31/5/15..... 1915

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, George Harold Baker, 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.

George Harold Baker (Signature of Recruit)
J. R. Munroe (Signature of Witness)
 Date..... 31/5/15..... 1915

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..... Sherbrooke, P.Q...... this 31st day of June..... 1915

J. R. Munroe (Signature of Justice)
Officer
George Harold Baker (Approving Officer)

Description of Lt-Colonel G. H. Baker

Appointed on Enlistment.

Apparent Age 37 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 5-7 ft. 7 ins.

Chest measurement { Girth when fully expanded 38 1/4 ins.
 Range of expansion 3 1/4 ins.

Complexion Dark

Eyes Grey

Hair Black

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 May 26th 1915.

Place Sherbrooke, P.Q.

J.R. Goddall
 Capt Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

George Harold Baker 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.

G.H. Baker Lt. Colonel
 (Signature of Officer)
 O. C., 5th CANADIAN MOUNTED RIFLES

Date 2/6/15 1914.

Casualty Form—Active Service.

Regiment or Corps 5th Canadian Mounted Rifles

Regimental No. _____ Rank Lt.-Col Name Baker, George Harry

Enlisted (a) 31 May 15 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				

LANDED IN FRANCE
24th 10.15.

22/4/16 AG, B.H.Q.
6.6.16 AG, B.H.Q.

Granted 8 days leave
Wounded, since died (Died of wounds)

Field.
Field.

23/2/16
3/6/16
Bris. 25/4/16 P.H. No 17
II Army G.H.A. list 641 d/4/6/16
D.C.S 134 P.H. No 23 7/6/16

Edw. Wright Lieut.,
1st Lt. Col., A.A.G.

(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, Shoening Smith, etc., etc., also special qualifications in technical Corps duties. (P.T.O.)

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				



Rank and Name Lt.Col. BAKER George Harold

Regimental No.

Name and Address of Next-of-kin Miss Effie Baker,

Unit 5th C.M.R.

Bolton Centre A.F.B. 158.

Date of enlistment Sherbrooke. P.Q. 31/5/15

NOV. 1 DEC 1915

Place of birth Mississquo. P.Q.

Married (Yes or No) Single.

Date and place of discharge

If in Permanent Force

Reason for discharge

Character on discharge

Promotions or appointments

Died of Wounds 3-6-16
Left Canada 15-9-15.
APR 1 1916
1 MAY 1916
JAN 31 1916
5 C.M.R.



Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
		5 C.M.R. 8/Seas	24-10-15.		
2/4/16	5 C.M.R.	granted 8 day leave from		23/2/16	Pr Ord. 17.
7/6/16	Tele	Reported from Base as "Died of Wounds"		3-6-16	C/L 384 Pr 11.0.23 - 5 C.M.R.

Jue

A.F.B. 103
8 NOV. 1918

Surname Christian Name

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
Baker (Col.) 20th Regt. Sherrbrooke, E.C. Barrack	27 years Advocate S.C.	2	184	38	1	4					

MEDICAL HISTORY SHEET.

Surname Baker (Col.) Christian Name G.H.

Examined { on 26th day of May 1915
 at Sherbrooke, P.Q.
 Birthplace { City or Town Sweetsburg
 County P.Q.

Approved by *Jas R Goodall*
 Rank Capt M.O.

Apparent age 37 years
 Trade or occupation Advocate
 Height 5 Feet 7 Inches.
 Weight 164 Lbs.
 Chest measurement { Minimum 35 inches.
 Maximum expansion 38 1/4 inches.

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Physical development
 Small-Pox Marks
 Vision 4/5
 Vaccination Marks { Arm Right Left ✓
 Number 2

Date	Result	VACCINATIONS,
<u>8/9/15</u>	<u>po.</u>	<i>J.R. Goodall</i> M.O.
		M.O.
		M.O.

When Vaccinated last
 (a) Marks indicating congenital peculiarities or previous disease
none

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>5/7/15</u>	<u>po.</u>	<i>Jas R Goodall</i> M.O.
<u>15/7/15</u>	<u>"</u>	<i>Jas R Goodall</i> M.O.
<u>28/9/15</u>	<u>"</u>	<i>Jas R Goodall</i> M.O.

(b) Slight defects but not sufficient to cause rejection

Enlisted on 7 day of January 1915 at Montreal

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>5th Cuir</u>			
Transferred to..				

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.

Baker.

G

H.

Lt-Col.

5th. C.M.R.

Reported from base:-

DIED OF WOUNDS:- 3-6-16.

C.L. 7-6-16.

384.

MP

Surname

Christian Name

Reg. No.

Rank

Unit

MEDICAL BOARD held at

Date

Serial No.

(1)

Other Medical Boards at

Date

Serial No.

(2)

(3)

(4)

(5)

Condition found by Board

Disposition Recommended

(1)

(2)

(3)

(4)

(5)

PENSIONS & CLAIMS BOARD held at

Date.....

Disposition

Remarks

BAKER, Geo. Harold, Lieut.-Col. 5th C.M.R. H.A.P. ✓

Elig. for 1914-15 Star

Lt. Col. 5th C.M.R.

M

4070

MEDALS &
DECORATIONS.

Misses. Harriet J. & Effie Baker
210 Hutchison St., (Sisters)
Montreal, P.Q.

PLAQUE &
SCROLL

Mrs. Louisa Workman Pickel (Elddest
Cowansville, P.Q. Sister

Serial No 781664

CROSS OF
SACRIFICE

No one entitled.

FEB 17 1921

Scroll Desp.

Reqn. No 220746

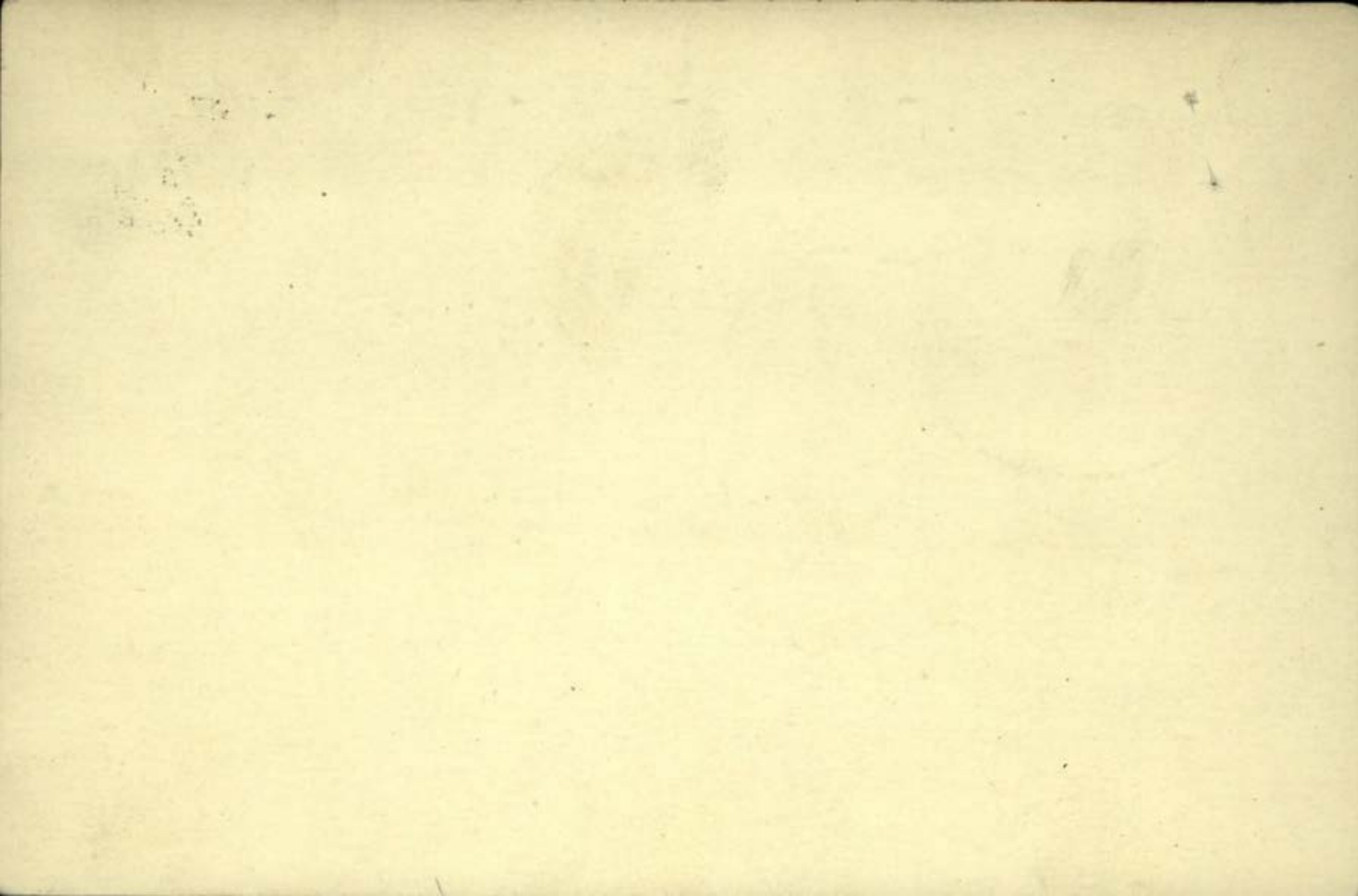
DEC 20 1921

Plaque Desp.

Reqn No

P21483

mab.



No.

RANK

Lt. Col.

NAME

Baker, G. H.

T. O. S. 201. H-1-15

UNIT

5th Canadian Mounted Rifles

M. D. 4

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Jan. 4	1915 Jan. 31	✓		
Feb.		✓		
Mar.		✓		
April		✓		
May		✓		
June		✓		
July		✓		

UNIT SAILED
JUL 18 1915



NAME

Baker, George Harold

REGT'L. NO.

RANK AND CORPS

Lieut-Colonel 5th C. In. R.

CABLE

No.

DATE

NATURE OF CASUALTY

C.

on 7474 6-6-16

killed of wounds June 3rd. L

B2090a Rouen

" " " rec'd in action 3rd June 1916

7/4/16

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

384^u

Rep. from Base (Tel)

3-6-16

Died of wounds

SURNAME.

Baker.

(2145-1)

CARD NO.

818

CHRISTIAN NAMES

George Harold

FOLL

D

REGL. No.

RANK Lt. Col.

UNIT

5th C.M.R.

FORMER CORPS

6th Hussars ^{1st} & 13th S L Dragoons 29-9-13. Auth 0-9. Enrol 1917

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Baker Miss Effie

RELATIONSHIP TO SOLDIER

ADDRESS

~~Bolton Centre P.Q.~~

Go J.W. Cunliffe, Delafield Lane.
Riverdale, New York, N.Y. letter 2/3/17

COUNTRY OF BIRTH

Canada, Sweetsburg, Missisquoi,

DATE

PLACE OF ATTESTATION

Sherbrooke.

DATE

2/6/15

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

Present Address: Sweetsburg, P. Me

MEDICAL EXAMINATION. PLACE

DATE

Date of sailing 14-7-15. Date of Appt. 4-1-15. Auth. O. 9. 4. Nov 1. 1915

Number.....

Rank.....

LIEUT/col

Surname.....

BAKER

Christian Name.....

GEORGE HAROLD

Units.....

Theatre of War.....

FRANCE

Date of Service.....

24. 10. 15.

Remarks.....

(Sisters)

Latest Address.....

Misses Harriet J. & Effie Baker,

210 Hutchison St.,

Montreal

Roll No.....

Page 18172 P.O.

200m.-2-21.M.

DATE

HISTORY



CASUALTY BRANCH

(FILES)

NAME _____ H. Q. _____

NO. _____ RANK _____ M. D. _____

UNIT (C.E.F.) _____ UNIT _____

ADDRESS _____

NEXT OF KIN _____

ADDRESS (KIN) _____

HISTORY

DATE

46916

9/10/16



REGIMENT 201 258 1921

REGIMENT 201 258 1921

Handwritten signature

Number Rank *LIEUT / COL* A

Surname *BAKER*

Christian Names *GEORGE HAROLD* V

Unit Theatre of War *FRANCE*

Dates of Service

Remarks *Sister*

Latest Address *Misses Harriet J + Effie Baker*

210 Hutchison St

Montreal P. Q.

Roll No. *13*

Gr. 11156. West.

APR 1 3 1879

Gr. A 37037 West.

SEP 8 1921

UNIT *5th C.M.R.*

NAME

Lieut Col. G. H. Baker

DATE OF APPOINT

ASSIGNED PAY:—

MARRIED (YES OR

MONTHLY AMOUNT

NEXT OF KIN:—

TO WHOM PAYABLE

DATE NON-EFFECT

BANK IN WHICH PAY & ALLOWANCES DEPOSITED

AND CA

Died of wounds. 3rd 76. C.L. 38H. 7th 16

PERIOD		No. OF DAYS	REGTL. RATE <i>C.O. \$1. per d.</i>	AMOUNT OF REGIMENTAL	PAY		CR. FROM PREV. ACCOUNT	TOTAL PAY	As by RATE OF FIELD ALLOWANCE	charges AMOUNT OF FIELD ALLOWANCE	Debit Balance P.F. ALLOWANCE	ALLOWANCES		TOTAL	TO ALL	
FROM	To				3A COMMAND	Messing ADJUTANT						Credit Balance MESSING	Bank. SUBSISTENCE			
<i>1. 8. 15</i>	<i>31. 8. 15</i>	<i>31.</i>	<i>1.00 pay \$ 25. 7H 1.00 Mes.</i>	<i>186</i>	<i>38 75</i>	<i>33</i>		<i>257 75</i>					<i>257 75</i>			
<i>1. 9. 15</i>	<i>30. 9. 15</i>	<i>30.</i>		<i>180</i>	<i>37 50</i>	<i>30.</i>		<i>247 50</i>					<i>247 50</i>			
<i>1. 10. 15</i>	<i>31. 10. 15</i>	<i>31.</i>		<i>186</i>	<i>38 75</i>	<i>31.</i>		<i>255 75</i>					<i>255 75</i>			
<i>1. 11. 15</i>	<i>30. 11. 15</i>	<i>30.</i>		<i>180</i>	<i>37 50</i>	<i>30</i>		<i>247 50</i>					<i>247 50</i>			
<i>1. 12. 15</i>	<i>31. 12. 15</i>	<i>31.</i>		<i>186</i>	<i>38 75</i>	<i>31.</i>		<i>255 75</i>		<i>4 50</i>			<i>251 25</i>		<i>Ord issues 12764</i>	
<i>1. 1. 16</i>	<i>31. 1. 16</i>	<i>31.</i>		<i>186</i>	<i>38 75</i>	<i>31.</i>		<i>255 75</i>		<i>8 94</i>			<i>246 81</i>		<i>clothing Boots</i>	
<i>1. 2. 16</i>	<i>29. 2. 16</i>	<i>29.</i>		<i>174</i>	<i>36 25</i>	<i>29.</i>		<i>239 25</i>					<i>239 25</i>			
<i>1. 3. 16</i>	<i>31. 3. 16</i>	<i>31.</i>		<i>186</i>	<i>38 75</i>	<i>31.</i>		<i>255 75</i>					<i>255 75</i>			
<i>1. 4. 16</i>	<i>30. 4. 16</i>	<i>30.</i>		<i>180</i>	<i>37 50</i>	<i>30</i>		<i>247 50</i>					<i>247 50</i>			
<i>1. 5. 16</i>	<i>31. 5. 16</i>	<i>31.</i>		<i>186</i>	<i>38 75</i>	<i>31.</i>		<i>255 75</i>					<i>255 75</i>			
<i>1. 6. 16</i>	<i>30. 6. 16</i>	<i>30.</i>		<i>180</i>	<i>37 50</i>	<i>30</i>		<i>247 50</i>					<i>247 50</i>			
							<i>103 43</i>						<i>247 50</i>			
<i>W.E.B. Aug/16</i>							<i>4 99</i>							<i>350 93</i>		<i>10343 C.L.</i>
<i>W.E.B. Sept/16</i>														<i>355 92</i>		<i>421 C.L.</i>
<i>W.E.B. Feb/17</i>											<i>355. 92</i>			<i>0</i>		<i>Do Canada 27/17</i>

SUNDRY PAYMENTS

DATE	CHEQUE NO.	PARTICULARS

Statement of
JAN 8 1917
ACC. REC. PAID

ASSIGNED PAY.

UNIT.

RANK.

NAME. ✓

NAME OF DATE AUTHORITY

DATE AUTHORITY

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.

L.M.R.

Lt. Colonel

Name *Baker*

Initials *G.H.*

Bank *Bank of Montreal*

Died of Wounds 3rd 6th 1884 7th 1884

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case	INITIALS ✓
1916								
	<i>April Pay April (R.)</i>		<i>247 50</i>			<i>247 50</i>		
	<i>26 Bank</i>			<i>247 50</i>		<i>0</i>		
	<i>May Pay May (R.)</i>		<i>255 75</i>					
	<i>26 Bank</i>			<i>255 75</i>				
	<i>June 19 Pay June (R.)</i>		<i>247 50</i>					
	<i>27 Bank</i>			<i>247 50</i>		<i>247 50</i>		
	<i>Aug 1 Tfr to N.B. Branch</i>			<i>247 50</i>		<i>0</i>		

*June 1884
carried forward
Tfr to N.B. Branch*

