

Unit 5th Pioneers Rank Leut. Name Jack G.E.

OFFICERS' DECLARATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

ORIGINAL
5th PIONEER
BATTALION
C. E. F.

QUESTIONS TO BE ANSWERED BY OFFICER

(ANSWERS)

1. (a) What is your Surname? Jack
- (b) What are your Christian Names? George Edmund
2. (a) Where were you born? (State place and country) South Shields, England.
- (b) What is your present address? 250 Old Orchard Ave. N.D.G. Montreal. Can.
3. What is the date of your birth? 5th. October 1889
4. What is (a) the name of your next-of-kin? Mrs. Ellen Jack,
- (b) the address of your next-of-kin? 250 Cartier Street, Ottawa, Ont. Can.
- (c) the relationship of your next-of-kin? Mother.
5. What is your profession or occupation? Building Construction Engineer
6. What is your religion? Church of England.
7. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes
8. To what Unit of the Active Militia do you belong? 87th. Regiment, Quebec.
9. State particulars of any former Military Service. Qualified as Captain.
10. Are you willing to serve in the
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? YES

The undersigned hereby declares that the above answers made by him to the above questions are true.

Jack G.E. (Signature of Officer.)

CERTIFICATE OF MEDICAL EXAMINATION

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him* fit for the CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Date 24 May 1916

Place Montreal

W. J. Barlow Capt
Medical Officer.

*Insert here "fit" or "unfit"

DECLARATION OF INTENT

CANADIAN CITIZENSHIP EXAMINATION FORM

QUESTIONS TO BE ANSWERED BY CANDIDATE

ANSWER

1. What is your name?

2. What are your Christian names?

3. Where were you born? State place and country.

4. What is your present address?

5. What is the date of your birth?

6. What is the name of your last school?

7. (a) The names of your next of kin?

(b) The relations of your next of kin?

8. What is your profession or occupation?

9. How long have you been in Canada?

10. Are you willing to be sworn to the Oath of Allegiance?

11. Do you know the meaning of the Oath of Allegiance?

12. Do you know the meaning of the words "I will do my best to observe the laws of Canada and to be true to the Queen?"

13. Do you know the meaning of the words "I will do my best to observe the laws of Canada and to be true to the Queen?"

CERTIFICATE OF MEDICAL EXAMINATION

I have examined the above named person and find him/her to be of sound mind and body and fit to receive the Oath of Allegiance.

Signature of Medical Officer: _____

Date: _____

Signature of Candidate: _____

Date: _____

93
26-2-19

DECEASED
DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

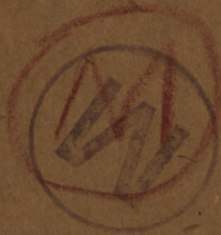
- Proceedings of Court of Inquiry or on men
Reported Missing on Active Service.....
- Attestation Papers..... *1/11 3*
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet.....
- Compulsory Stoppages.....
- Casualty Forms..... *2*
- 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.....

Name JACK GEORGE EDMUND.

Regt. No. _____ Rank Lieut.

Corps 5th Bn.

Died 14-12-18.



00049



7m 4w 64

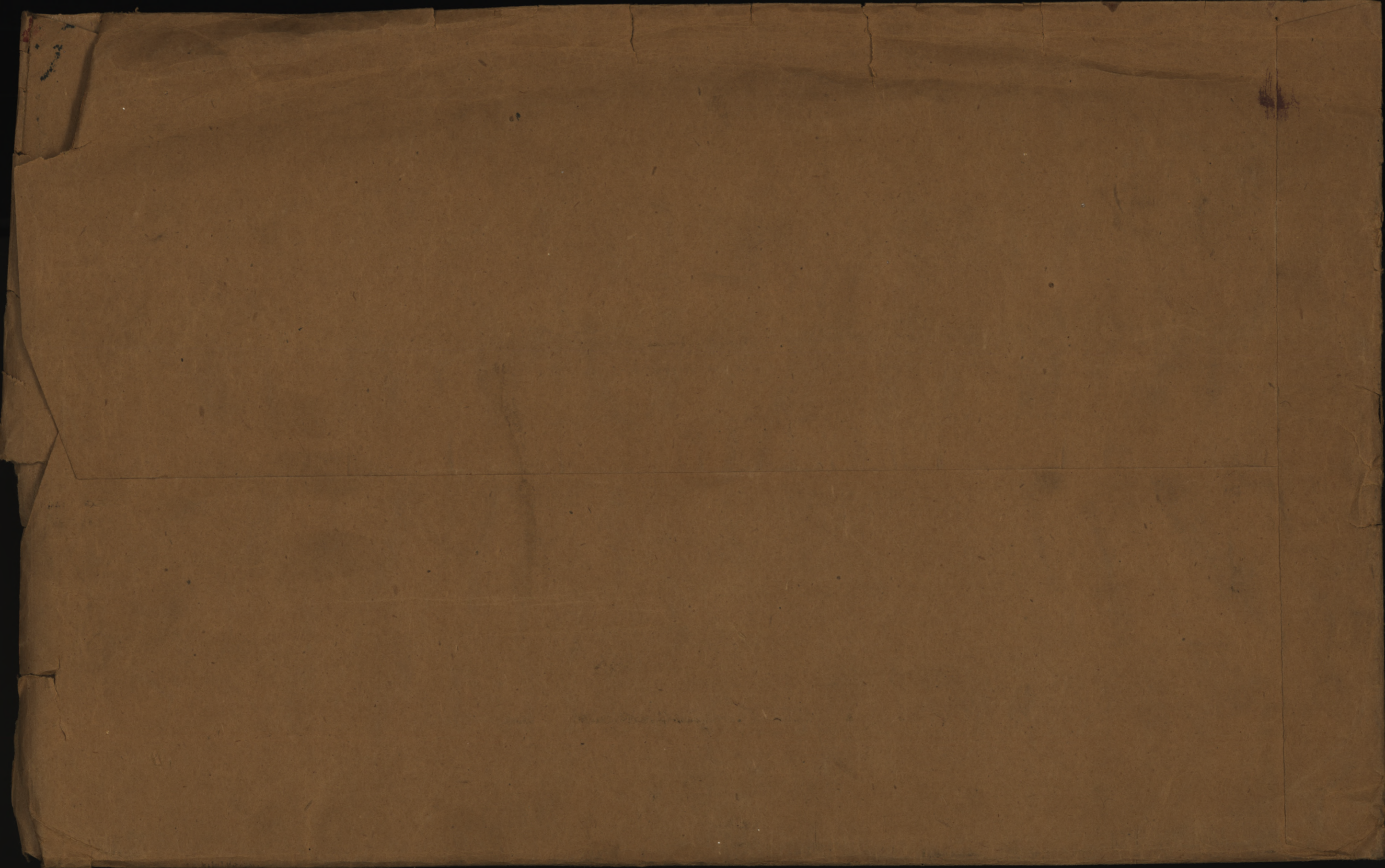
2/11/1918

M. F. W. 62.
50m.-9-16.
H. Q. 1772-39-935.

*ms-2
Paycard*

ref. a.m.s. 0526

*2
2-10
2-10*



Surname.

Christian Name.

JACK

G. E.

Capt.

Unit.

-Lieut.

1st Lab. Battr. 3rd, Can. Inf. Wks. Coy.

Date of admission.

No. 6 Canadian Field Ambulance. 8-2-18.

Hosp. 201 General Hospital, Camiers. 15-2-18.

No. 24 General Hospital, Etaples. 17-2-18.

No. 64 Casualty Clearing Station 13-12-18

Transferred Hosp.

..... Hosp.

..... Hosp.

..... Hosp.

Tonsillitis

Broncho-pneumonia (Dang. ill 13-12-18)

DIED: -14-12-18. a.s.

Diagnosis.

Later diagnosis.

.....
.....
.....

Disposition.

Disch. to Duty: -9-3-18.

14-2-18. 907. (3 weeks sick leave to U.K.)

18-2-18 910.

23-2-18 915.

14-3-18 931-2.

C.L. 23-12-18 1171. & note.

Remarks.

C.L.
C.L.
C.L.
C.L.
C.L.
C.L.
C.L.

A.M.D. 2 DEPT.

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

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

Remarks

JACK, Geo. Edmund, Capt. 1st Can. Inf. Wks. Bn.

Not elig. for 14-15 Star.

MEDALS &
DECORATIONS

Mrs. Ellen Jack (Mother) ✓
180 Cartier St., OTTAWA, ONT.

PLAQUE &

Mother, as above.

SCROLL

MEMORIAL
CROSS

Mother, as above.

25463

scroll Desp.

Reqn. No. 2-21486

Plaque Desp.

Reqn. No.

86
Desp.

DEC 7 1921
OCT 2 - 1920

P19794

(M) @ 25323

M

671

1/2

NAME

Jack, John Gordon

REGT. NO.

RANK AND UNIT

Capt.

3rd Railroad Supply Detachment
(Form #1, U.S.A.)

NEXT OF KIN

He.

CABLE

No.

DATE

NATURE OF CASUALTY

No.	DATE	NATURE OF CASUALTY
02210	16-12-18	Dang. ill 64 C. S. S. Dec. 13/18 Bronchopneumonia.
02213	17-12-18	D. of bronchopneumonia Dec. 14, 1918.
02237	26-12-18	Ref. to my tel. Dec. 14, 1918 02210 ref. to my tel Dec. 16 02214 for Capt. John Gordon Jack 3 Railroad Supply Detachment should read Capt. George Edmund Jack 3 Inf. Works Co.,

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

1164 ¹	64 C. C. Stat.	13-12-18	Dunhill Bronchitis Pneumonia
1166 ¹	64 C. C. Stat.	14-12-18	Died (Pres up Dunhill) Bronchitis Pneumonia
1171 ³ .	Ref 1164 + 1166		both these entries should refer to Capt. G. E. Jack. ex Cav. Inf. Works Coy.

Name JACK.

Rank Capt.

Reg. No. JA

Unit John

3rd Can

^{ordon}
 GR Ind. Supply Detach.
 Inf Wks Coy

Next of Kin

Thomas Jack.

 2 Church Avenue
 Blackrock - Ireland.

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

13-12	64th CCS. DANGEROUSLY ILL.	(Tel. 116).	Broncho Pneumonia.	114	2210	
-------	-------------------------------	-------------	-----------------------	-----	------	--

14-12	Tow-apt Base <u>Died</u>	XX 318.		1166	2209	
-------	-----------------------------	---------	--	------	------	--

Above entries should refer to Capt. George Edmund JACK
 3rd Can. Inf Wks. Coy.

				1171	2237	nt/12
--	--	--	--	------	------	-------

NAME

Jack George Edmund

REGT. No.

RANK AND UNIT

Capt.

3 Inf Works Co.

NEXT OF KIN

Mrs Ellen Jack (Mother) 180 Cartier St. Ottawa,
Ont.

CABLE

NATURE OF CASUALTY

No.

DATE

02210¹⁻² 16-12-18

Also S.R. 1171

02213¹⁻³ 17-12-18

Dang. ill 64 C. C. S. Dec. 13/18

Broncho Pneumonia

D. of Broncho pneumonia
Dec. 14, 1918.

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

1171¹

64 C. C. Stat.

14-12-15

Died (Prev. rept.
Wangill) Broncho Pneumonia

608

Name JACK — Rank LIEUT. — Reg. No. —
 Unit G. edge E. dnuud
 Next of Kin 1st Lab. Bn. —
 Canada.

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
8-2	6 Can. Fld. Amb	(13514)	Tonsillitis.			
15-2-18	20 Gen. Hospitaliers (UK)			802		
17-2-18	24 Gen. Hospitaliers			819		
9-3-18	Disch to duty (3 weeks L to UK)			815		(WA 19969)
				831		(WA 855)

NAME

RANK AND CORPS

CABLE

NO.

DATE

NATURE OF CASUALTY

REGT'L. No.

H. Q. FILE NO 649

FOLLOWS

NO.

FOLLOWS

Jack G. E
Sieut

1st. Labour Bn

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

907-1	6. Can. Field Amb.	8-2-18	Tonsillitis.
910	20 Gen Camiers	15-2-18	Tonsillitis
915 ^①	24 Gen Staples	17-2-18	Tonsillitis
931 ^③	Disch to duty.	9-3-18	Tonsillitis

Number.....Rank **CAPT.**.....

Surname.....**JACK**.....

Christian Name.....**GEORGE EDMUND**.....

Units.....Theatre of War **FRANCE**.....

Date of Service.....**27. 11. 16. 14. 9. 17. 14. 12. 18.**.....

Remarks.....
1st CO.

Latest Address.....**Mrs. Ellen Jack (m)**.....

.....**180 Carter St.**.....

Ottawa

Roll No. **"B" Page 6781**

Ont.

B

No

RANK

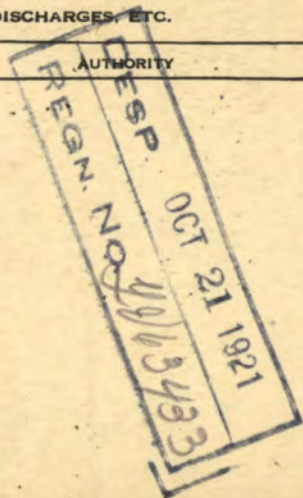
NAME

T. O. S.

UNIT

M. D.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY



No.

FRANK

Leint

NAME

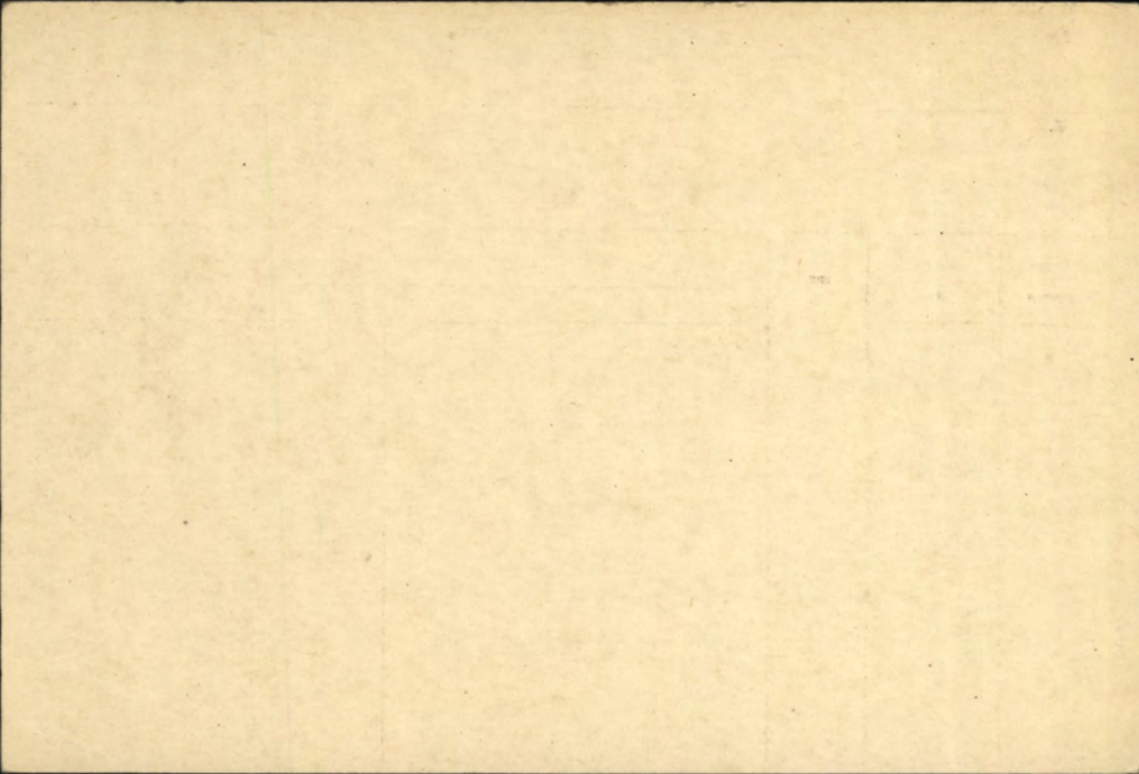
Jack C. E.

T. O. S. 2-5-16

UNIT

*5th Pioneer Battalion C. E. A.**(N.O. 1 19-5-16)*M. D. *4.*

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
<i>1916</i>	<i>1916</i>			
<i>may 2</i>	<i>may 31</i>	<input checked="" type="checkbox"/>		
	<i>June</i>	<input checked="" type="checkbox"/>		
	<i>July</i>	<input checked="" type="checkbox"/>		
	<i>Aug</i>	<input checked="" type="checkbox"/>		
	<i>Sept</i>	<input checked="" type="checkbox"/>		
	<i>Oct</i>	<input checked="" type="checkbox"/>		
	<i>Nov</i>	<input checked="" type="checkbox"/>		



b. 11
SURNAME.

Jack.

CARD NO. *X*

CHRISTIAN NAMES

George Edmund.

FOLL.

REGL. NO.

RANK

Lieut.

UNIT *5th*

Pioneer.

Bn.

FORMER CORPS

87th Regt.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Jack. Mrs. Ellen

RELATIONSHIP TO SOLDIER

Mother.

ADDRESS

*180 Bartier St.,
Ottawa, Ont.*

COUNTRY OF BIRTH

England, South Shields.

DATE

Oct. 8th 1889.

PLACE OF ATTESTATION

DATE

Date of sailing per S.S. "Metagama" 27-11-16.

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

Building const

RELIGION

Church of England

suction Engineers.

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION.

PLACE

Montreal, P. Q.

DATE

May, 2nd 1916.

*Present address, 250. Old Orchard Ave. N. D. G.
Montreal, P. Q.*

1st Corp ✓
 Name **JACK** ✓
 George Edmund Rank **Capt.** ✓
 Unit ~~3rd~~ **Can. Inf. Works Coy.**
 Next of Kin **Canada**

ja
 Reg. No. **9 J359**

AB 104-93.

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
13-12	64 C.C.S. (Tel. Ref. 116) DANGEROUSLY ILL	Broncho-	Pneumonia	1171	0.2210 0.2214	2417
14-12	<u>DIED</u> (Tel. KX318)	-	-	1171	Correction 0.2237	
See att. card						

ORIGINAL MEDICAL HISTORY SHEET

5th PIONEER
BATTALION
O. E. F.

Surname Jack Christian Name George Edmund

Examined { on 2nd day of May 1916
 at Standing Medical Board
Montreal
 Birthplace { City or Town South Shields
 County England

Approved by M. Barlow
 Rank Capt. M.O.

Apparent age 26 years 6 mos.
 Trade or occupation Building Construction Engineer
 Height 5 Feet 6 Inches.
 Weight 135 Lbs.
 Chest measurement { Minimum 34 inches.
 Maximum expansion 38 inches.
 Physical development Good
 Small-Pox Marks none

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

Vaccination Marks { Arm Right Left /
 Number 1
 When Vaccinated last child
 (a) Marks indicating congenital peculiarities or previous disease none

Date.	Result.	VACCINATIONS.
<u>22/9/16</u>	<u>2</u>	<u>C. G. [Signature]</u> M.O.
		M.O.
		M.O.

(b) Slight defects but not sufficient to cause rejection

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>13/7/16</u>	<u>2</u>	<u>T.A.B. 12.6.17 W.P.S.</u> M.O.
<u>29/7/16</u>		<u>[Signature]</u> M.O.
<u>29/7/16</u>		<u>T.A.B. 11.5.17 W.P.S. Capt</u> M.O.

Enlisted on 2nd day of May 1916 at Montreal Que.

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>5th - O. B. Pioneer</u>	<u>Lieut.</u>		<u>2nd May 1916</u>
Transferred to	<u>Batter</u>			
	<u>Lab. Sqn.</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.

O.P.F.

DUPLICATE

To be made out in duplicate.

H.Q. 54-21-23-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins..... **5th PIONEER BATTALION**
..... **C. E. F.**

(2) Regimental Number

(3) Full Name of Soldier..... *George Edmund Jack*

(4) Place of Birth..... *South Shields Durham Co. England*

(5) Are you married, or not?..... *No*

(6) If married, state,
(a) Full name of your wife.....
.....
(b) Present Postal Address.....
.....

(7) Are you a widower?..... *No*

(8) Have you any children?.....
If so, give number of boys and girls.....
Also their names and ages.....
.....
.....
.....
.....

(9) Is your Father alive? *Yes*

If so, state name and address *James Alexander Jack 180 Carter St Ottawa Canada*

(10) Is your Mother alive? *Yes*

If so, state name and address *Ellen Jack*

180 Carter St Ottawa Canada

(11) If your Mother is a widow */*

Are you her sole support, or not? */*

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

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

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

(15) Are you insured? *Yes*

If so, in what Company? *Canadian Travellers*

Have you made arrangements for payment of your Insurance premium? *Yes*

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Date *Oct 6th 1916*

A. C. Jack
Officer Commanding
Co. 5th Pioneer Bn C.E.F.

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

5th HONBLE
BATTALION
C. E. F.

FORM OF WILL.

107276

I, Lieut. George Edmund Jack, (Name in full)

Regimental Number _____ serving in 5th Pioneer 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. Ellen Jack
180 Carter St.
Ottawa, Ont. Canada

Name and Address
of person or
persons to whom
it is to go.

absolutely, and my personal estate I bequeath to

Mrs. Ellen Jack
180 Carter St.
Ottawa, Ont. Canada

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 19th day of October, A. D. 1916.

G. E. Jack 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 Phineas B. Phillips

Address of Witness 250 Old Orchard Ave Montreal

Occupation of Witness Wife of P. B. Phillips

Signature of Second Witness Phineas

Address of Witness 250 Old Orchard Ave, Montreal

Occupation of Witness Textiler

**THE TWO
WITNESSES
MUST
SIGN HERE**

FORM OF WILL

Handwritten text, likely the beginning of a will, including the name of the testator.

I declare that I am of sound mind

Name of Testator
Age
Residence

Handwritten signature and name of the testator.

Witnesses
Name
Residence

Handwritten names of witnesses.

WITNESSES
THEY HAVE SEEN
THE TESTATOR
SIGN AND SEAL
THE WILL

Faint handwritten text, possibly a clause or a signature.

Faint handwritten text, possibly a clause or a signature.

Faint handwritten text, possibly a clause or a signature.

Faint handwritten text, possibly a clause or a signature.

FORM OF WILL

I, Lieut. George Edmund Jack, (Name in full)

Regimental Number serving in 5th Pioneer 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.

bequeath

I devise ~~my~~ all my real estate unto

Mrs. Ellen Jack,
180 Cartier St.,
Ottawa, Ont. Canada.

Name and Address
of person or
persons to whom
it is to go.

absolutely, and my personal estate I bequeath to

Mrs. Ellen Jack,
180 Cartier St.,
Ottawa, Ont. Canada.

Name and Address
of person or
persons to receive
personal estate*
(See note).

NOTE

This space for the
appointment of
Executor if
necessary.

IMPORTANT NOTE

this 19th day of October A.D. 191 6

This must be signed
and Dated by
THE SOLDIER
HIMSELF.

G.E. Jack, 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 Muriel B. Phillips.

Address of Witness 250 Old Orchard Ave., Montreal.

THE TWO
WITNESSES

Occupation of Witness Wife of B.H. Phillips.

MUST
SIGN HERE

Signature of Second Witness B.H. Phillips.

Address of Witness 250 Old Orchard Ave., Montreal.

Occupation of Witness Gentleman.

FORM OF WILL

WILL

TESTAMENTARY

WILL

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this _____ day of _____, 19____.

Witness my hand and seal, this _____ day of _____, 19____.

Attest:

Notary Public

My Comm. Expires _____

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

M. F. W. 54. (A. F. B. 193.)
250M.—1-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

CERTIFIED CORRECT
22 SEP 1917
ARMY RECORD OFFICE

m.x.
23-9-17

Unit, Regiment or Corps 5th OVERSEAS PIONEER B.N. U.E.F.

Regimental No. _____ Rank Lieut Name Jack George Edmund

Enlisted (a) 2/5/16 Terms of Service (a) 6.8.7 Service reckons from (a) 2/5/16 27/11/16

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) Building Construction Engineer

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 33, 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. 33, or other official documents.
Date	From whom received				
27/11/16	H.Q.	Embarked Canada	Halifax	27/11/16	H.M. J Metagana
6/12/16	"	Arrived England	Liverpool	6/12/16	"
9/2/17		Transferred to Res Bn	Branchott	9/2/17	DD II 4998 Pasell Adjutant 5th O/S Pioneer Battalion C. E. F.
11-2-17	25th Res.	Taken on strength	Branchott	10-2-17	Part II Order 42.
14/9/17	25th Res.	Struck off strength to Labour Corps Base Depot	Branchott	19/9/17	Part II Order 258. Labour Corps Base Depot
14/9/17	No. List 477	Arrived and TOS Labour Bn.	Field	14/9/17	DD II O# 48 d/27/9/17
22/9/17	do.	Joined unit	do	22/9/17	B213
8.17.17	do.	Conducting off. with draft to in Bn. Ch. D.	do	8.17.17	B713.
8.17.17	do.	Received unit from Bn. duty.	do	8.17.17	B213.
8.2.18	6 b. 2. a.	Completed 4 b. 2. a. (ban. corps duty)	do	8.2.18	D 1892
10.2.18	4 b. 2. a.	do.	do	10.2.18	D 2079

(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.]

Lieut. Jack G. E.

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				
13.2.18	4652a	Tonsillitis to 6665		13.2.18	D 2781
9.2.18	Unit	To Hospital		8.2.18	B 213. Pt. II Q/14d/28.2.18
12.2.18	6665a	Tonsillitis		12.2.18	D 3241
14.2.18	Do	Do to 28 Train		14.2.18	D 3241
17.2.18	24 Gen.	Do		17.2.18	D 3523
14.2.18	20 Gen.	Do	Adm.	14.2.18	W. 3034-D 3624
17.2.18	Do	Do	24 Genl. Hq	17.2.18	W. 3034-D. 3555
21.2.18	Leat of moves Appto Etc.	Admitted to Hospital		12.2.18	Leat No. 254 d/21-2-18. Pt. II Q/14d/28.2.18
9.3.18	24 Gen. Hq	Tonsillitis	To duty	9.3.18	W. 3034-D 6673
14.3.18	do	Granted 21 days sick leave to Eng.		9.3.18	Leat No 1068 d/14-3-18 O.C. 24 Genl. Hq. K.D 25859/4 Pt. II Q/17d/19-3-18. Pt. II Q/19d/26-3-18
		Designation changed to 1st Can Inf Works Bn (Auth: War Office letter 121/Overseas/4840 (A.G.12) d/11-3-18.			
21.3.18	C.5.B.D	Arrived at Base from leave		31.3.18	Base Return (R.R.) B.E.347
6.4.18	do	Left Base for unit		6.4.18	B.213.
13-4-18	Unit	Rejoined from leave		11-4-18	B.213.
24.8.18	1st Can. Inf. Works Bn	Granted 8 Days leave to Paris.		23.8.18.	B.213. Pt. II Q/52 d/3.9.18.
7.9.18.	do	Rejoined from do.		7.9.18.	B.213.
1.8.18.	London Gazette	To be <u>Temp. Capt.</u>		13.3.18.	No. 30823 (p. 9084) (Ref. A.A.G. file K.X. 15/18331.) Pt. II Q/57 d/21.9.18.
19.9.18.	A.A.D. Adms.	Class. "A"	Ed.	19.9.18.	Med. Bd. 727 (R.R.) Pt. II Q/57 d/21.9.18.

Casualty Form - Active Service.

Regiment or Corps *5th Inf Wks Coy*

Rank *Capt* Surname *JACK* Christian Name *G. E.*

Religion..... Age on Enlistment..... years..... months

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

Date of promotion to present rank..... Date of appointment to lance rank.....

Extended {.....} Re-engaged {.....} Qualification (b).....
or Corps Trade and rate.....

Occupation..... Signature of Officer.....

Report		Record of promotions, reductions, transfers, casualties, &c. during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked			
		Disembarked			
<i>14.9.18.</i>	<i>5th Inf Wks Coy</i>	<i>Att'd for duty</i>	<i>Fld.</i>	<i>14.9.18.</i>	<i>B213. Lab. Comm. Cdn. Para. M. 16-7-1 d/12.9.18. para 8</i>
<i>3.10.18.</i>	<i>bdu Cps.</i>	<i>Proceed "on command" Sup. Labour Pool Escort.</i>		<i>3.10.18.</i>	<i>G. L. M. 21-3-23 ^{3/10} 18 P. II D 11 14/8.</i>
<i>26.10.18.</i>	<i>3 B I Wks Coy</i>	<i>Granted 14 days leave UK.</i>		<i>21.10.18</i>	<i>B213 P. II 067 d/9.11.18</i>
<i>9-11-18</i>	<i>O.C. 3 B I Wks Coy</i>	<i>Rejoined from leave UK.</i>		<i>8-11-18</i>	<i>B213 P. II 068 d/20.11.18</i>

(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) Signaller, Shoeing Smith, &c.

Capt Jack G

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.

Date	Report From whom received	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
25-11-18	AC & R	To be Temp Capt	15-9-18	List NO 214 7/17-11/18
15-12-18	OC. 64 b b A	Died (Broncho Pneumonia)	15-12-18	Tel. 232 004
		W. Johnson		File KA 22432.
		Captain for Lt. Col. A. A. G. Cdn Sect. 3rd Ech. G. H. G.		P. II 073 7/1918

Surname JACK

Christian Names George Edmund

Rank Lieut *Capt.*

Name and Address of Next-of-Kin Mother.

Promotion

Mrs Ellen Jack.

180. Cartier Street. Ottawa. Ontario.

Unit 5th Pioneer Battn

Canada. 25 Res. Bn 15-2-17

Place of birth South Shields. England.

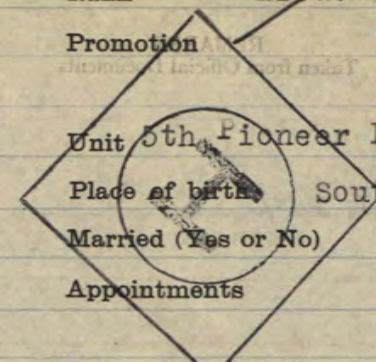
Married (Yes or No)

Appointments

Date of leaving Canada 27.11.16 *14.9.12.16* Date and Cause of Resignation

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				
11.2.17	25 Res Bn	<i>J.O.S.</i>		10.2.17	<i>Pt II 0.42. Braw. P.O. 383.</i>
9.2.17	5 th Pns.	<i>Trans. to 25th Res. Bn</i>		9.2.17	<i>Pt II 0.40</i>
14.9.17	<i>Holkstone</i>	<i>Qualified 1st Class Airing Combined Course & H.W. Beechell</i>		14.9.17	<i>4.8.17 R. 68.4.3934</i>
14.9.17		<i>Proceeded overseas to labor Bn</i>		14.9.17	<i>T.O.S. 14.9.17. Pt II std 1 Lab. Bn</i>
14.2.18.	B.A.M.S.	<i>Adm. no 6 ban: Field Ambulance</i>		8.2.18.	<i>C.L. 907. Gonorrhoea</i>
18.2.18.	"	<i>Adm. no 20 gen: Hosp, baniers</i>		15.2.18.	<i>C.L. 910 Gonorrhoea</i>
23.2.18	"	<i>Adm. no 24 gen: Hosp, staples</i>		14.2.18	<i>C.L. 915 "</i>
14.3.18	"	<i>Discharged to duty, granted 3 weeks sick leave to U.K.</i>		9.3.18	<i>C.L. 931. Pt II std 1 Lab. Bn</i>
17.7.18	H.A.O.M.F.C.	<i>Trans from W.O.R to 1st C.O. Reg. effect</i>		14.9.17	<i>R.O. 4362</i>
1.8.18	W.O.	<i>To be Temp Captain C.O.R.</i>		13.3.18	<i>L.G. 30823</i>
3.9.18	<i>1 can. by the Reg.</i>	<i>granted 8 days leave to Paris</i>		23.8.18	<i>Pt II 0, 52.</i>
9.11.18	"	<i>granted 14 days leave to U.K.</i>		21.10.18	<i>" 67.</i>

COR



M

A.F.B. 1030
22 SEP 1917

Report		Record of Promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
17-11-18	GHO vs	From 1 st Cdn Inf Works Bn to be Temp Captain 2 nd Cdn Inf Works Coy		15 9 18	ACR 214
23 Dec	amb	Adm 64 Casualty Clearing Station Dangerously ill		13-12-18	Chs 1171 Broncho Pneumonia
23-12-18		Prev Rptd dangerously ill now Died		14-12-18	Chs 1171 Broncho Pneumonia (978 104 43 70200) (Chs 9-1-19)

9979

Register No. DJ334

WAR SERVICE GRATUITY
TO
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. 9384-9-8

3m

Regt'l No. Name George Edmund Jack
(Christian Name) (Surname)
Unit 3rd Inf Batt. Rank Capt Date of enlistment
Date of casualty 14-12-18 B.P.C. File No. 58008
Was service performed overseas? yes

DEPENDENT

Name Mrs Ellen Jack Relationship W. Mother
Address 180 Cartier St
Oahu Ind

M.F.W. 2652
25M-6-20,
H.Q. 1772-89-1473

Emb

Amount of Special Pension Bonus \$ nil Abstracted by M. L. Dunn

Eligible for Gratuity \$ 240.
Less amount of Special Pension Bonus paid \$
Less Debit Balance of S. A. or A.P. \$

Total deductions \$

Balance due \$ 240.

Cheque No. 51899671 Date issued AUG - 7 1920

Clerk AM meil

REMARKS :

Audited by
Ed Howard
Date 6-8-20

\$240

86

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname

Christian Name

Regimental Number

Rank

Address (in full)

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Rates :—Regimental pay \$ _____ per diem; Field Allowance \$ _____ per diem. Separation Allowance \$ _____ per month.

L.L. 53961—M. & D. 9721

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

Remarks:

M. F. W. 127
 300M-1-19
 1772-39-1140

Rank Name Reg'l No.
 Unit If in perm. Corps, What Unit? Married or Single
 Place and Date of Enlistment Place of Birth
 Name and Address, Next-of-Kin

Relationship

Assigned Pay Monthly \$ Payable to

Relationship

Separation Allowance Payable to

Relationship

Discharge, Date and Place Reason Character

5 Pr Bn.

5 Pr Bn.

Date		PAY		Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc
From	To	No. of Days	Rate	Amount	No. of Days	Rate			Amount	No.						
A 2 M Form 2/9/18.																
Assignment as at September 1st 1918.																
Jack,		George E.			Captain.			1st Can. Inf. Works Bn.		\$45.00						
Mrs. Ellen Jack (Mother) 180, Cartier Street, Ottawa, Ontario.																

\$ 1 1/4
 Payment Stopped
 A. 3 M Form
M. A. Conroy

Charged 50 from 1¹/₁₆ - 31³/₁₆ = 150.

Assignment as at
April 1st. 1913

Fraser. 65. J.M. Shorncliffe Me. Hospital \$ 50
Mrs J.H. Winfield 94 Victoria Road
Halifax N.S.

\$ 50

Payment Stopped
A. 3rd Form

Retd in Canada 1 January 1918

Date		PAY		Field Allowance		Other		Total		Voucher		Cash		Assigned pay		Charges		Total		Debits		Balance		Remarks, Casualties, etc.	
From	To	No. of Days	Rate	Amount	Rate	Amount	Credits	Other	Total	No.	Date	Payments	Cash	Assigned pay	Other	Charges	Total	Debits	Total	Balance	Remarks, Casualties, etc.				

ASSIGNED PAY.

UNIT.

RANK.

NAME.

Beneficiary

Address

Amount, \$

Separation Allowance issued. Yes or No.....

NAME OF DATE AUTHORITY

25 Res B-
1st C.I. Works Bu

Pay 2/16
7.11.16
Mund

Lieut

Mrs

DATE

AUTHORITY

7¹²/₁₆ Canada
No 1142.658

Name Jack
Initials G. E.
Bank of Montreal.

1/3 Capt.

13.3/8

(B'shott) d 9¹²/₁₆
7.5.241 22/18
7 D.P.M.G.

Add Outfit Allee 18/18 - \$100.

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
1918 Apr 15	Pay April (R)		108					
24	Bank 1143			108				
May 16	Pay May (R)		111 60					
23	Bank 2623			111 60				
June 13	Pay June (R)		108					
24	Bank 4126			108				
July 18	Pay R.		111 60					
24	Bank 5607			111 60				
Aug 1	Adjustment for 13 ³ / ₈ - 31 ⁷ / ₈ = 141 Days @ 1 ¹ / ₂ p.c.		162 15					
1	Bank 5799			162 15				
15	Pay R.		147 25					
24	Bank 7161			147 25				
Sept 10	A.P. ban				45		A 2 m 19/18.	
14	Sept Pay R.		142 50					
25	Bank 9139			97 50				
Oct 10	A.P. ban				45			
17	Oct Pay R.		147 25					
19	Bank 10348			102 25				
30	Adalt Outfit Allee (due 18/18)		100					
Nov 11	Pay R. (Capt 4a 7 12 ⁹ / ₁₈) A.P. ban		142 50					
	Bank 10853			100				
			20					
			142 50					
				45		117 50		
				117 50				
Dec	Pay R A.P. ban		155					
					45			
						110		

19⁴/₁₉-1.

19

Food

ASSIGNED PAY.

UNIT.

RANK.

NAME.

Beneficiary

Address

Amount. \$ 45

Separation Allowance issued. Yes or No.....

NAME OF DATE AUTHORITY

DATE AUTHORITY

1. C. J. W. W. W. W.

1/ Capt 13³ 18

Name

Initials

Bank

*Jack
J. J.
Montreal*

Died 14¹²/18 b.L. 11⁴¹ d/ 23¹²/18

DATE

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

SPECIAL AUTHORITIES
To be initialled by P.M. in every case.

INITIALS

1918

*Dec 9
18*

*1919
Jan 22*

31

Feb

July 15

*Brought Forward
Bank 10770*

C. J. E. List 23. Jany. V6434 272

C. J. E. List 41 Jany. V6771 190

To adjust J. V. M. 641 showing Cr. of Frances to office which shld be marked 859

July 15 Cr Bal trans to CTO List 48 July 16 190

110

272

190

272

190

110

272

462

190

*Pat to lease 31¹²/18
Infr. to N. E. Ledger 11.
L. 18 Jan 1919.
Statement ofc rendered 18⁴/19
Leit Bal 81.90
Dist form to Actg 13⁴/19*

ASSIGNED PAY.

UNIT.

RANK.

Mess.
DATE

NAME.

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.....

NAME OF

DATE

AUTHORITY

25 Res. Bn.

See 2nd per diem
for body, 11/18/16
total 3rd pay.

Lieut

7¹²/₁₆

AUTHORITY

Fr Canada
R.O. #1142 C.T.D.
(Bshott) d/9¹²/₁₆

Name

JACK.

Initials

G. E.

Bank of

Montreal.

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
1917								
April 23	Pay April (R)		108					
25	Bank	3017		108				
May 18	Pay May (R)		111 60					
24	Bank	6029		111 60				
June 18	Pay June (R)		108	X				
20	Bank	9012		108				
July 18	Pay July (R)		111 60					
24	Bank	13082		111 60				
Aug 20	Aug. Pay (R)		111 60					
22	Bank	17394		111 60				
Sept 15	Pay Sept (R)		108					
17	Bank	21814		108				
Oct 10	Pay Oct (R)		111 60					
20	Bank	26118		111 60				
Nov 15	Pay Nov (R)		108					
22	Bank	30733		108				
Dec 10	Pay Dec (R)		111 60					
13	Bank	35096		111 60				
1918								
Jan 15	Pay Jan (R)		111 60					
22	Bank	39425		111 60				
Feb 12	Pay Feb (R)		100 80					
19	Bank	40953		100 80				
March 12	Pay March (R)		111 60					
22	Bank	42610		111 60				

ASSIGNED PAY.

UNIT.

15

RANK.

NAME.

NAME OF DATE AUTHORITY

Memo
DATE

AUTHORITY

Beneficiary

5th Pioneer Bn

Lt.

7-12-16 From Canada

Name Jack,
Initials Geo. Edmund
Bank of Montreal.

Address

P.O. #1142 C.S.D.
(Bshok) 49-12-16

Amount. \$

Separation Allowance issued. Yes or No.....

DATE
1916

PARTICULARS

1916-17

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

SPECIAL AUTHORITIES
To be initialled by P.M. in every case.

INITIALS

Dec 30. P. St. 1-31st Aug. 7-31st C. Del. 5⁵⁰ Bank
1917
Jan 22 do do do V 16700
22 Pay Jan. (R)
23 Bank.
Feb 20 Pay Feb (R)
24 Bank.
Mar 20 Pay Mar. (R)
24 Bank.

158 10

158 10

158 10

111 60

19289

111 60

100 80

21932

100 80

111 60

24838

111 60

Bank
Initials
Name

Bank

DATE

Department Allowance Issue No.

PARTICULARS

CR. NO.

CR.

DR.

AMOUNT PAID IN ADVANCE
CANADA

BALANCE

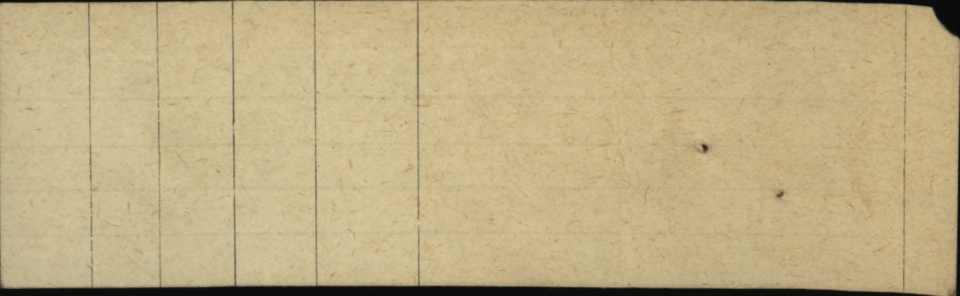
SPECIAL AUTHORITY

INITIALS

Lieut

Jack G. B.

107276



Date of Enlistment 2.5-16

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

CANCELLED **J. 4790**
1st Sept-18

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

40			
----	--	--	--

RATE OF ASSIGNMENT

45.00			
-------	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. _____
 Rank _____ Promoted _____ Reverted _____ Discharge _____
 Soldier's Name _____
 Battalion 5th Pioneer Batt^y
 Beneficiary _____
 Relationship _____
 Address _____

Name _____
 Address _____
 Change of Address _____
 1 MRS. ELLEN JACK,
 180 CARTIER ST.,
 2 OTTAWA, ONT. 45 45.00
 3 % CAPT. G. E. JACK
 4 FORTY FIVE DOLLARS

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1918 Oct	m 698		45	45	File 9384-9-8. N.P. 412. Mailed 19/18 to adjust A/P for Sept. SA a/c opened from 1 7/8 per PAUB ruling folio 11 on above file. M 4476 Mailed 9/18 toady SA from 1 9/8 to 3 11/18 M RO 42892 alteration issued 2 11/18
Oct	f 54192		45	45	
Nov	Am 4476	80		80	
Nov	E. 50748	40	45	85	
Dec	N 64367	40	45	85	
1919 Jan					

KILLED IN ACTION
 DIED OF WOUNDS DATE 14-12-18
 C. L. No. 406 DATE 30-12-18
 M. R. O. 55101 TO DESTROY RENDERED 2-1-19
 B. P. C. FORM 1 & G. F. X. COMPLETED ON FILE
9384-9-8
 CLERK SBS DATE 2/19

M. F. W. 128
 FORM 6-17-1773-30-1141
 L. L. 22320-M. & D. 1933.

AUTHORITY FOR NEW ACC'T. }
 P. 2. 16. 19. 8. - 18.
 G. Short. 4. 10. - 18.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date

Cheque No.

Amount S/A

Amount A/P

Total

REMARKS

M. F. W. 128.
 4704, 6-7-1792-83-141
 L. L. 2230-M. & D. 1992.