

R.B.1

16

MINISTRY OF
FOOD
1953 - 1954



SERIAL NO.

1

AF 701226

RATION BOOK

Surname Bell Initials (Glewin)

Address 18, Priory Close

Waltham

St. Doncaster Yorks.

IF FOUND
RETURN TO
ANY FOOD
OFFICE

F.O. CODE No.

NM-G
3-1

FILL IN THE SPACES BELOW IF YOU DEPOSIT WITH
YOUR RETAILER ANY OF THE PAGES 13-18

FOOD	NAME AND ADDRESS OF RETAILER WITH WHICH COUPONS ARE DEPOSITED.	INITIALS OF RETAILER.

NOTES

DEPOSITED ROWS OF COUPONS SHOULD BE
RECOVERED AND PRODUCED TO THE FOOD OFFICE
IF A TEMPORARY RATION CARD IS REQUIRED OR
THE ADDRESS IS CHANGED.

WHERE THE ADDRESS IS CHANGED MAKE SURE
THAT THE PARTICULARS GIVEN ON PAGE 6 ARE
CORRECT BEFORE GOING TO THE FOOD OFFICE.

**THIS BOOK IS VALID FOR USE ONLY WHEN THE
HOLDER IS RESIDENT IN THE UNITED KINGDOM**

TO RETAILERS

It is essential for the successful operation of the
rationing system that coupons should be either cancelled
or cut out as appropriate, whenever rationed food is
supplied to a consumer.

E.B.1 DO NOT FILL IN OR DETACH
16 UNTIL INSTRUCTED

16

SURNAME

OTHER NAMES

(In full)
HOME ADDRESS

(AT TIME OF APPLICATION)

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PLEASE USE BLOCK LETTERS & ENTER FULL POSTAL ADDRESS

I apply for a new ration book in the above name, and
I declare that

* (a) I am the holder of the Ration Book of which this
page forms a part, or

* (b) I am the parent or guardian of the holder, or

* (c) I have been authorized to apply for a new Ration
Book by the holder.

* DELETE WHERE NOT APPLICABLE

SIGNATURE _____

Serial No. of New Book _____

ENDORSEMENTS

F.O. Code

NM-G
3-1

MINISTRY OF FOOD—Rationing Year 1953-54

4 Week Period	Week No.	RATION WEEK Sunday—Saturday	4 Week Period	Week No.	RATION WEEK Sunday—Saturday
1	1	17 May - 23 May	7	25	1 Nov. - 7 Nov.
	2	24 May - 30 May		26	8 Nov. - 14 Nov.
	3	31 May - 6 June		27	15 Nov. - 21 Nov.
	4	7 June - 13 June		28	22 Nov. - 28 Nov.
2	5	14 June - 20 June	8	29	29 Nov. - 5 Dec.
	6	21 June - 27 June		30	6 Dec. - 12 Dec.
	7	28 June - 4 July		31	13 Dec. - 19 Dec.
	8	5 July - 11 July		32	20 Dec. - 26 Dec.
3	9	12 July - 18 July	9	33	27 Dec. - 3 Jan.
	10	19 July - 25 July		34	3 Jan. - 9 Jan.
	11	26 July - 1 Aug.		35	10 Jan. - 16 Jan.
	12	2 Aug. - 8 Aug.		36	17 Jan. - 23 Jan.
4	13	9 Aug. - 15 Aug.	10	37	24 Jan. - 30 Jan.
	14	16 Aug. - 22 Aug.		38	31 Jan. - 6 Feb.
	15	23 Aug. - 29 Aug.		39	7 Feb. - 13 Feb.
	16	30 Aug. - 5 Sept.		40	14 Feb. - 20 Feb.
5	17	6 Sept. - 12 Sept.	11	41	21 Feb. - 27 Feb.
	18	13 Sept. - 19 Sept.		42	28 Feb. - 6 Mar.
	19	20 Sept. - 26 Sept.		43	7 Mar. - 13 Mar.
	20	27 Sept. - 3 Oct.		44	14 Mar. - 20 Mar.
6	21	4 Oct. - 10 Oct.	12	45	21 Mar. - 27 Mar.
	22	11 Oct. - 17 Oct.		46	28 Mar. - 3 Apl.
	23	18 Oct. - 24 Oct.		47	4 Apl. - 10 Apl.
	24	25 Oct. - 31 Oct.		48	11 Apl. - 17 Apl.
			13	49	18 Apl. - 24 Apl.
				50	25 Apl. - 1 May
				51	2 May - 8 May
				52	9 May - 15 May

For F.O. use

PLEASE USE BLOCK LETTERS

A R.D.1/16

R.D. Serial No.

5

FORM R.G.12A

SURNAME.....

OTHER NAMES.....
(IN FULL)ADDRESS.....
.....
.....

B

C

D

FOR FOOD OFFICE USE

From
F.O.

To (F.O. Code)

NM-6

3-1

Date.....

6 ENTER NAMES AND ADDRESSES OF RETAILERS

MEAT	If Coupons Buy Retailer Entries "R.B." If Coupons Deposited Retailer Entries "C.D."	
EGGS		
FATS F. S. SCUFFHAM, GROCER, MATTERSEY.		
CHEESE F. S. SCUFFHAM, GROCER, MATTERSEY.		
BACON F. S. SCUFFHAM, GROCER, MATTERSEY.		
SUGAR F. S. SCUFFHAM, GROCER, MATTERSEY.		
SPARE		

COUNTERFOILS FOR REGISTRATION 7

RETAILER must see that Holder's name and address are entered overleaf, fill in his name and address below and see that they are entered on page 6 opposite, and detach the counterfoil.

RETAILER'S name and address. Counterfoil for **MEAT**

R.B.1

16

RETAILER'S name and address. Counterfoil for **EGGS**

R.B.1

16

3	2	1	
Surname and Initial			
12 11 10 9 8 7 6 5 4 3 2 1	3	2	1
Surname and Initial			
12 11 10 9 8 7 6 5 4 3 2 1	3	2	1
Surname and Initial			
12 11 10 9 8 7 6 5 4 3 2 1	3	2	1
S P R Q	P S R Q	P S R Q	
Surname and Initial			

8 COUNTERFOILS FOR REGISTRATION

HOLDER must enter his name and address below and pass the book to the Retailer. The Retailer will detach the counterfoil and return the book.

Counterfoil for **MEAT**
 HOLDER'S Surname Initials **R.B.1**
 Address **16**

Counterfoil for **EGGS**
 HOLDER'S Surname Initials **R.B.1**
 Address **16**

CHEESE	MATTERSEY, S. SOUFFHAM, GROCER.		
BACON	MATTERSEY, S. SOUFFHAM, GROCER.		
SUGAR	MATTERSEY, S. SOUFFHAM, GROCER.		
SPARE	MATTERSEY, S. SOUFFHAM, GROCER.		

If Coupons Deposited Retailer returns to D.O. 11/14

R.B.1
16

9

with retailer	MEAT	12	11	10	9	8	7	6	5	4	3	2	1
			3				2				1		
	*Surname and Initials												
	EGGS	12	11	10	9	8	7	6	5	4	3	2	1
			3				2				1		
	*Surname and Initials												
	12	11	10	9	8	7	6	5	4	3	2	1	
		3				2				1			
*Surname and Initials													
	12	11	10	9	8	7	6	5	4	3	2	1	
		3				2				1			
*Surname and Initials													
	12	11	10	9	8	7	6	5	4	3	2	1	
		3				2				1			
*Surname and Initials													
	12	11	10	9	8	7	6	5	4	3	2	1	
		3				2				1			
*Surname and Initials													

13	14	15	16	17	18	19	20	21	22	23	24	MEAT
	4				5					6		
13	14	15	16	17	18	19	20	21	22	23	24	EGGS
	4				5					6		
13	14	15	16	17	18	19	20	21	22	23	24	FATS C H E E S E
	4				5					6		
13	14	15	16	17	18	19	20	21	22	23	24	CHEESE
	4				5					6		
13	14	15	16	17	18	19	20	21	22	23	24	BACON
	4				5					6		
13	14	15	16	17	18	19	20	21	22	23	24	SUGAR
P	Q	R	S	P	Q	R	S	P	Q	R	S	

MEAT	26	25	24	23	22	21	20	19	18	17	16	15
		9				8				7		
EGGS	26	25	24	23	22	21	20	19	18	17	16	15
		9				8				7		
FATS C H E E S E	26	25	24	23	22	21	20	19	18	17	16	15
		9				8				7		
CHEESE	26	25	24	23	22	21	20	19	18	17	16	15
		9				8				7		
BACON	26	25	24	23	22	21	20	19	18	17	16	15
		9				8				7		
SUGAR	26	25	24	23	22	21	20	19	18	17	16	15
	S	R	Q	P	S	R	Q	P	S	R	Q	P

*Fill in if you deposit sections with retailer.

*Surround and initial.

50	52		Surname _____				F.B.1 16	
TEA	TEA							
13	13							
13	13							
TEA	TEA	Initials _____						
49	51							
34	36		38	40	42	44	46	
TEA	TEA	TEA	TEA	TEA	TEA	TEA	TEA	TEA
9	9	10	10	11	11	12	12	12
9	9	10	10	11	11	12	12	12
TEA	TEA	TEA	TEA	TEA	TEA	TEA	TEA	TEA
33	35		37	39	41	43	45	
18	20		22	24	26	28	30	
TEA	TEA	TEA	TEA	TEA	TEA	TEA	TEA	TEA
5	5	6	6	7	7	8	8	8
5	5	6	6	7	7	8	8	8
TEA	TEA	TEA	TEA	TEA	TEA	TEA	TEA	TEA
17	19		21	23	25	27	29	
2	4		6	8	10	12	14	
TEA	TEA	TEA	TEA	TEA	TEA	TEA	TEA	TEA
1	1	2	2	3	3	4	4	4
1	1	2	2	3	3	4	4	4
TEA	TEA	TEA	TEA	TEA	TEA	TEA	TEA	TEA
1	3	5	7	9	11	13	15	

If you deposit this page fill in overleaf and on Page 2.

14	15	16	15	16	15
C	C	B	B	A	A
14	13	14	13	14	13
C	C	B	B	A	A
13	11	12	11	12	11
C	C	B	B	A	A
10	9	10	9	10	9
C	C	B	B	A	A
8	7	8	7	8	7
C	C	B	B	A	A
6	5	6	5	6	5
C	C	B	B	A	A
4	3	4	3	4	3
C	C	B	B	A	A
2	1	2	1	2	1
C	C	B	B	A	A

5	16	15	16	15	16
A	A	B	B	C	C
13	14	13	14	13	14
A	A	B	B	C	C
11	12	11	12	11	12
A	A	B	B	C	C
9	10	9	10	9	10
A	A	B	B	C	C
7	8	7	8	7	8
A	A	B	B	C	C
5	6	5	6	5	6
A	A	B	B	C	C
3	4	3	4	3	4
A	A	B	B	C	C
1	2	1	2	1	2
A	A	B	B	C	C

Initials.....

Surname.....

DO NOTHING WITH THIS PAGE UNTIL INSTRUCTED.

IF YOU DEPOSIT THIS PAGE FILL IN OVERLAY AND ON PAGE 2		F	F	F	F	
	52	51	22	21	16	17
	F	13	F	F	F	F
	F	F	F	6	F	F
	50	49	34	23	14	13
	48	47	26	25	12	11
F	12	F	F	F	F	
F	F	F	7	F	F	
46	45	38	27	10	9	
44	43	30	29	8	7	
F	11	F	F	F	F	
F	F	F	8	F	F	
42	41	32	31	6	5	
40	39	34	33	4	3	
F	10	F	F	F	F	
F	F	F	9	F	F	
38	37	36	35	2	1	

COUNTERFOIL

NAME.....

OTHER NAMES (if any).....

ADDRESS.....

DO NOTHING WITH THIS PAGE UNTIL INSTRUCTED.

F	F	F	F		
17	18	19	20	21	22
F	F	F	F	F	F
15	16	21	22	51	52
F	F	F	F	F	F
13	14	23	24	49	50
F	F	F	F	F	F
11	12	25	26	47	48
F	F	F	F	F	F
9	10	27	28	45	46
F	F	F	F	F	F
7	8	29	30	43	44
F	F	F	F	F	F
5	6	31	32	41	42
F	F	F	F	F	F
3	4	33	34	39	40
F	F	F	F	F	F
1	2	35	36	37	38

Initials

Surname

COUNTERFOIL

R.B. Serial No.

X	X	X	X	X	X	X
52	51	50	49	48	47	46
X	X	X	X	X	X	X
45	44	43	42	41	40	39
X	X	X	X	X	X	X
38	37	36	35	34	33	32
X	X	X	X	X	X	X
31	30	29	28	27	26	25
Y	Y	Y	Y	Y	Y	Y
24	23	22	21	20	19	
Y	Y	Y	Y	Y	Y	
18	17	16	15	14	13	
Y	Y	Y	Y	Y	Y	
12	11	10	9	8	7	
Y	Y	Y	Y	Y	Y	
6	5	4	3	2	1	

If you detach this page fill in details
overleaf.

X	X	X	X	X	X	X
46	47	48	49	50	51	52
X	X	X	X	X	X	X
39	40	41	42	43	44	45
X	X	X	X	X	X	X
32	33	34	35	36	37	38
X	X	X	X	X	X	X
25	26	27	28	29	30	31
Y	Y	Y	Y	Y	Y	
19	20	21	22	23	24	
Y	Y	Y	Y	Y	Y	
13	14	15	16	17	18	
Y	Y	Y	Y	Y	Y	
7	8	9	10	11	12	
Y	Y	Y	Y	Y	Y	
1	2	3	4	5	6	

Surname.....
Initials.....

Food Office Code No. as on front cover

Surname and Initials.....

This page may be detached and used by itself but, if you do detach it, you should fill in details above.

E6	E6	E6	E6	D6	D6	D6	D6
E5	E5	E5	E5	D5	D5	D5	D5
E4	E4	E4	E4	D4	D4	D4	D4
E3	E3	E3	E3	D3	D3	D3	D3
E2	E2	E2	E2	D2	D2	D2	D2
E1	E1	E1	E1	D1	D1	D1	D1

Do not cut out coupons

THE SHOPKEEPER WILL DO THIS FOR YOU

D6	D6	D6	D6	E6	E6	E6	E6
D5	D5	D5	D5	E5	E5	E5	E5
D4	D4	D4	D4	E4	E4	E4	E4
D3	D3	D3	D3	E3	E3	E3	E3
D2	D2	D2	D2	E2	E2	E2	E2
D1	D1	D1	D1	E1	E1	E1	E1

Food Office Code No. as on front cover

Surname and Initials.....

This page may be detached and used by itself after period 6 but, if you do detach it, you should fill in details above.

E13	E13	E13	E13	D13	D13	D13	D13
E12	E12	E12	E12	D12	D12	D12	D12
E11	E11	E11	E11	D11	D11	D11	D11
E10	E10	E10	E10	D10	D10	D10	D10
E9	E9	E9	E9	D9	D9	D9	D9
E8	E8	E8	E8	D8	D8	D8	D8
E7	E7	E7	E7	D7	D7	D7	D7

IF FOUND RETURN TO ANY FOOD OFFICE

D13	D13	D13	D13	E13	E13	E13	E13
D12	D12	D12	D12	E12	E12	E12	E12
D11	D11	D11	D11	E11	E11	E11	E11
D10	D10	D10	D10	E10	E10	E10	E10
D9	D9	D9	D9	E9	E9	E9	E9
D8	D8	D8	D8	E8	E8	E8	E8
D7	D7	D7	D7	E7	E7	E7	E7

PANEL 2

1	2	1	3	4
5	6	2	7	8
9	10	3	11	12
13	14	4	15	16
17	18	5	19	20
21	22	6	23	24
25	26	7	27	28
29	30	8	31	32
33	34	9	35	36
37	38	10	39	40
41	42	11	43	44
45	46	12	47	48
49	50	13	51	52

PANEL 1

1	2	1	3	4
5	6	2	7	8
9	10	3	11	12
13	14	4	15	16
17	18	5	19	20
21	22	6	23	24
25	26	7	27	28
29	30	8	31	32
33	34	9	35	36
37	38	10	39	40
41	42	11	43	44
45	46	12	47	48
49	50	13	51	52

PANEL 3

1	2	1	3	4
5	6	2	7	8
9	10	3	11	12
13	14	4	15	16
17	18	5	19	20
21	22	6	23	24
25	26	7	27	28
29	30	8	31	32
33	34	9	35	36
37	38	10	39	40
41	42	11	43	44
45	46	12	47	48
49	50	13	51	52

PANEL 4

1	2	1	3	4
5	6	2	7	8
9	10	3	11	12
13	14	4	15	16
17	18	5	19	20
21	22	6	23	24
25	26	7	27	28
29	30	8	31	32
33	34	9	35	36
37	38	10	39	40
41	42	11	43	44
45	46	12	47	48
49	50	13	51	52