Unit Officers Overseas Draft Rank Lieut. Name MacMillan M.A. Lieut

H.A.M. 17-5-17

OFFICERS' DECLARATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE ANSWERED BY OFFICER

[ANSWERS]

1. (a) What is your Surname? MACMILLAN
   (b) What are your Christian Names? Michael Allan
2. (a) Where were you born? (State place and country) Prince Edward Island, Canada.
   (b) What is your present address? 334 Avenue "E", South, Saskatoon, Sask.
3. What is the date of your birth? 25th December, 1892.
4. What is (a) the name of your next-of-kin? Mrs. Mary L. MacMillan.
   (b) the address of your next-of-kin? 205 Kent Street, Charlottetown, Prince Edward Island.
   (c) the relationship of your next-of-kin? Mother.
5. What is your profession or occupation? Student at Law.
6. What is your religion? Roman Catholic.
7. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes.
8. To what Unit of the Active Militia do you belong? 105th Saskatoon Fusiliers.
9. State particulars of any former Military Service none
10. Are you willing to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? Yes

Noted 2/5 G.M. 12/5/17

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

M A MacMillan (Signature of Officer.)

Taken on strength (place) Regina. Sask.

(date) 25th August, 1916.

W Lodge Lt. Col. (Signature of Commanding 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 August 25 1916.

Place Regina Sask. Denis Lenny Capt. C.A.M.C. Medical Officer.

*Insert here "fit" or "unfit

M. F. W. 51
100m.—4-16.
H. Q. 1772. 39-917

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers.....

Declaration of change of name.....

Authority for special enlistments.....

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.....

Pay Card (Pay)

M X 121020

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

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name MACMILLAN MICHAEL ALLAN

Regt. No.....Rank Lieut

Corps 3rd Ent Bn

Killed in Action 9-4-17

30260

1-2
1-2

OPEN

ATIP

8112

DOJ

FORM R. 149.
7106—250m—7/2/17.

Name MACMILLAN *Rank* Lieut. *Reg. No.* 9 M 292

Michael Allan

Unit 1st.CMR

Next of Kin Canada

A & B 10H-93

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
9/10.4.17.	Rep.from G.H.Q.	KILLED IN ACTION		648	M1834	14.4
	Date of casualty 9-4-17			648		

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

not elig. for Star.

1st R. M.R.

MacMILLAN, Michael Allan, Lieut. 19th Bn.

(m)

MEDALS & DECORATIONS — Mrs. Mary L. MacMillan (Mother) ~~1925 9th St., Wichita Falls, Texas, U. S. A.~~

6 10/22 205 Kent ST. Charlottetown P.E.I.

PLAQUE & SCROLL — Mother, as above.

Serial No 783448

MEMORIAL CROSS — Mother, as above.

Scroll Desp. FEB 22 1921 Reqn. No 2-22264

Plaque Desp. JUN 16 1922 Reqn. No P40177

Desp. 20-10-20 (m) C27460

M

713

Number ..... Rank LIEUT

Surname MACMILLAN

Christian Name MICHAEL ALLAN

Units ..... Theatre of War FRANCE

Date of Service 19 1 17

Remarks Mrs. Mary L. MacMillan (mother)

Latest Address 205. Kent St.
Charlottetown P.E.I.

Roll No. Page 18160

200m.-2-21.M. Sask

(This form to be filled in by all ranks on voyage to Canada.)

D.....

R	RANK	SURNAME	INITIALS	UNIT
.....	.....	.....	.....	.....

al address.....
(Street) (City or Town) (Province)

one person to be notified of arrival.....

.....

Station in Military District to which a furlough warrant is required.....

..... Railway.....

d, is your wife on board..... Number of children on board.....

tination.....

(Sgd.)

REGT'L NO

NAME Mac. Millan Michael Allan

H.Q. FILE No. 649-

RANK AND CORPS Lieut 1st. Regt. C. M. R.

FOLLOWS No.

FOLLOWS

CABLE No.	CABLE DATE	NATURE OF CASUALTY
M1834	13-4-17	Killed in action between Apr. 9th
OR902	15-4-17	Apr. 16th 1917.
G. H. B.	20-4-17	Killed in action 9-4-17
Rouen	24-4-17	Rec. 29-6-17.

L. L. 12767—M. & D. 7390.

M. F. W. 42—50M.—12-16.
H. Q. 1772-39-893.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
648-1	Rep. from Gen. H.S.	9-10-417	Killed in action
671-4	Pro date on list 648 reads. 9-4-17.		

SURNAME. Mac Millan (332-122-159)

CARD NO. 1

FOLD D

CHRISTIAN NAMES Michael Allan.

REGL. No.

RANK Lieut.

UNIT Officers O.S. Draft.

FORMER CORPS 105th. Regt.

NEXT OF KIN.

NAMES IN FULL Mac Millan Mrs. Mary S.

RELATIONSHIP TO SOLDIER Mother.

ADDRESS 205 Kent St. Charlottetown
Queens Co. P.E.I.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, P.E.I.

DATE Dec. 25th. 1892.

PLACE OF ATTESTATION Regina Sask.

DATE Aug. 25th. 1916

O. O/S. 25-9-16 $\frac{5-65}{2}$

King 9. 9-4-17

MARRIED SINGLE WIDOWER

TRADE OR CALLING Student at law RELIGION Roman Catholic

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE Regina Sask. DATE Aug. 25th. 1916

Present Address: 334 Ave. "E." South, Saskatoon Sask.

MacMillan. M. A.

Lieut. 1st. C.M.R.

KILLED IN ACTION:-. 9/10-4-17.

Correct date:-9-4-17

C.L. 14-4-17. 648.

11-5-17 671-4.note

A.M.D. 2 DEPT.

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

R

D. M. S. 1347.

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

Indicate by a P.T.O. if continued on other side.

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

M. F. W. 54. (A. F. B. 103.)
350M.—5,16
H. Q. 1772-39-920.

Casualty Form—Active Service.

affiliated draft to 196th

Unit, Regiment or Corps 196th Battalion. ~~Attached for c.m.s.~~

Regimental No. ~~Aug 25th 1916~~ Rank Lieut. Name Michael Allan MacMillan

Enlisted (a) ~~Aug 25th 1916~~ Terms of Service (a) C.E.F. Service reckons from (a) ~~Aug 25th 1916~~ 9/10/1916

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: 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
		Embarked	Halifax	27-9-16	Ag 7.10.1916
		Disembarked	Liverpool	6-10-16	
9-10-16	G.O.C.	Troops Posted to C.M.S.	Shorncliffe	6-10-16	D.O.CTD.NO.5274 d/9-10-16
		Attached 196th Batt'n	Seaford,	29-12-16	CMS Pt.II.No.129, d/27-12-16.
					D.O.L. Rochfort Capt & Adjutant, Canadian Military School.
31/12/17	196th Bn	attached to 196th Bn	Seaford	29/12/16	196 Part II orders 184 31/12/16
1/1/17	196th Batt'n	~~Attached~~ Transferred to 19th Res Bn	Seaford	1/1/17	19th Res Part II orders #1 1/1/17
1/1/17	19th Res	Taken on strength	Seaford	1/1/17	
16/1/17	19 Res Bn	Dropped to C.M.R. overseas	Seaford	16/1/17	19th Res Part II Order No 16 1/1/17

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

Major

[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				
12/1/17	W.O.	Arrived in France & taken on strength 1st Bn R's.		19/1/17	121/Draft B/4555 (B9 4a). Ref file KR 4/463 Bn no 8.
20/1/17	6 BD.	Left for 3rd Ent Bn.		20/1/17	NR.
22/1/17	OC 3rd Ent	Arrived "	Field	22/1/17	NR. & B213. d 28/1/17.
6/3/17	"	Left for Unit	"	6/3/17	NR.
11-3-17	6 Unit	Arrived Unit	"	7-3-17	B213. DO 223.
15-4-17	Unit.	Killed in Action	Field	9-4-17	B213. Pr II. 38. d 21-4-17.

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

ORIGINAL

MEDICAL HISTORY SHEET

Surname MacMillan Christian Name Michael Allan

Examined { on 25 day of August 1916
at Regina, Sask

Birthplace { City or Town Clarmont
County Prince Ed. Is.

Apparent age 24.

Trade or occupation Law Student

Height 5 feet 9 Inches

Weight 147 lbs.

Chest measurement { Minimum 32 1/2 inches
Maximum expansion 34 1/2 inches

Physical development fair.

Small-pox Marks none

Vaccination Marks { Arm Right Left
Number 1

When Vaccinated last 1909

(a) Marks indicating congential peculiarities or previous disease Scar on left side result of empyema in 1896

(b) Slight defects but not sufficient to cause rejection

Approved by Denis Sweeney

Rank Lieutenant C.E. 2nd M.O.

Date	Fit or Unfit	Examined for Re-Engagement	
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.

Date	Result	Vaccinations	
Dec	1916 +	C.C. Schlichter	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
Dec	1916 +	TAB 1/2 C.C.S.	M.O.
			M.O.
			M.O.

Enlisted on 25 day of August 1916 at Regina, Sask

	Corps	Regt'l Number	Habits	Date
Joined on enlistment				
Transferred to	1st C.M.R	Lieut		

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 Servcie, on the man becoming non-effective; the date and cause being stated on next page.

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

J

Surname MacMillan Christian Name Michael Allan

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			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
		Day	Month	Year	Day	Month	Year				

Cannot locate

FORM OF WILL.

I, N. Allan MacMillan (Name in full)

Regimental Number ..... serving in .....

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 Mary L MacMillan
205 Kent St Charlottetown
P E Island. Canada

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

absolutely, and my personal estate I bequeath to

Mrs Mary L MacMillan
205 Kent St Charlottetown
P E Island 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 25th day of August A. D. 1916

N. A. MacMillan 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.

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness Hugh Aird Jr
Address of Witness 810 Spadina Cres. Saskatoon Sask
Occupation of Witness student at law
Signature of Second Witness N. M. Lewis
Address of Witness 1364 Rae St. Regina
Occupation of Witness Soldier.

F. W. 82
00M-5-16.
1772-39-983.

FORM P. 15
5986—25M—19/1/17

ASSIGNED PAY.

UNIT.			RANK.			NAME.
NAME OF	DATE	AUTHORITY		Mess ~~DATE~~	AUTHORITY	
Beneficiary	G. L.		Lieut.	6 10/16.	for Canada	Name Mac Millan.
Address	19 Res Bn. 5 Cmr. 1 Cmr.				D.O. #527 H.Q.T.R. d/9 10/16.	Initials M. A.
Amount. $	Killed in Action 9 4/17. C.L. 671. 11 5/17.					Bank of Montreal
Separation Allowance issued. Yes or No.....	Killed in Action 9-10. 4-17 C.L. 648. 14 4/17.					

DATE 1916	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
Oct. 14.	Bank. Cr Bal.			42 70				
	Cr Bal. for Canada.		42 70					
19.	P & A. Oct. Mess. for 6 10/16.		106 60					
24.	Bank			106 60		0		
Nov. 17.	Pay Nov. R.		108 ..					
	Bank.			108 ..		0		
Dec.	Pay Dec. R.		111 60					
	Bank.			111 60		0		
1917. Jan. 9	Adv. Jan. P & A. Bank.	16767		24 33				
20	R. Pay.		111 60					
23	Bank.			87 27		0		
Feb. 19.	R. Pay.		100 80					
21.	Bank			100 80		0		
Mch. 17.	Pay R.		111 60				Hold apl Pay.	
26.	Bank.			111 60		0	Tfr to NE Ledger	
Apl 23	Pay apl 10 days		36			36	Dr. L. 21-12. 10 5/17	
May 19	Opd Pay 10 4/17. 1 day ~~#~~ 811 P.E			3 60		32 40		
June 20	Transferred to NE Branch #1740. NE			32 40		0		
July 12	Pay April 10-30 4/17		75 60					
12	Transfd NE Branch #1156			75 60		0		

FORM P. 15
5986--25M--19/1/17

ASSIGNED PAY.	UNIT. NAME OF	DATE	AUTHORITY	RANK.	DATE	AUTHORITY	NAME.	1
Beneficiary							Name	
Address							Initials	
							Bank	
Amount. $								
Separation Allowance issued. Yes or No.....								

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS	

FORM P.15
2227—10M—1/1/17

ASSIGNED PAY.	UNIT. NAME OF	DATE	AUTHORITY	RANK.	DATE	AUTHORITY	NAME. 19 JUN 1917
Beneficiary	19 Battn.			Lieut.	1 10/16	Fr. Canada P.O. 527 A.C.T.D. 9 10/16	Name MacMillan
Address	56 M.R. 1 C.M.R.						Initials M. A.
							Bank of Montreal
Amount. $	B.P.P. K.I.A. 9 4/17 bal. 691 - 11 5/17						Entered on N.E. Card Index
Separation Allowance issued. Yes or No.....	K.I.A. 9-10-4-17 bal. 648 - 14 7/17						Checked by

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
1917 Apl 23	Pay April 1st to 10th		36			36	Stop ass Pay	
May 19	Opd. K.A. 10 4/17. 1 day V 811. P.C.			360		3240	Dr to N.E. Ledger	
N.E. Bck July	K.A. 10-30 7/17 B.M. Bin. 10 7/17		75 60			108	Transferred fr. Ledger	
"	Nov 1/17 - Trans to Canada for sett 28 11/17 V 23/6.			108		—	21 to Ledger 12	10 5/17

Lieut Yates
Rate of Pay 2 00
" " Walker .60
" " Muss 1 00

Statement of
SEP 24 1917
Account rendered

Ass Pay ban. Nil as per D.R. 593-1-12 d/25/5/17

FORM P.15
2227—10M—1/1/17

ASSIGNED PAY.	UNIT. NAME OF	DATE	AUTHORITY	RANK.	DATE	AUTHORITY	NAME.
Beneficiary							Name
Address							Initials
							Bank
Amount. $							
Separation Allowance issued. Yes or No.....							

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS

P—15.

ASSIGNED PAY.

Beneficiary	Address	Amount. $	Separation Allowance issued. Yes or No.

UNIT. NAME OF: Gen. Lists. 19th Res. DATE: AUTHORITY:

RANK. Lieut. DATE: 6.1.16 AUTHORITY: for Canada 200th 52746.70 4-9-1916

NAME. 19 JUN 1917 MacMillan

Name McMillan
Initials M. A.
Bank of Montreal

Entered on N.E. Card Index
Checked by

DATE 1916	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case	INITIALS
Oct 14	Bank c/o bal 30/9/16			42 70				
19	Pa R Ot Mus pan 6/10/16		106 60					
	Cr bal pan Canada		42 70					
24	Bank			106 60		—		
Nov 17	Pay Nov R		108					
24	Bank			108		—		
Dec 11	Pay Dec R		111 60					
13	Bank			111 60		—		
1917 Jan 9	Adv Jan Pa. Bank	16767		24 33		24 33		
20	R Pay		111 60					
23	Bank	19283		87 27		—		
Feb 19	R Pay		100 80					
21	Bank	21903		100 80		—		
Mch 17	Pay Mch R		111 60					
26	Bank	24836		111 60		—		

P.-15

G. B. & S.

UNIT

NAME

DATE OF APPO

MARRIED (YES

NEXT OF KIN:

DATE NON-EFFE

AND

ASSIGNED PAY:—

MONTHLY AMOUNT

TO WHOM PAYABLE

BANK IN WHICH PAY & ALLOWANCES DEPOSITED

	PERIOD		No. of Days	Regtl. Rate	PAY					Rate of Field Allowance	ALLOWANCES					T
	From	To			Amount of Regimental	Command	Adjutant	Cr. from Prev. Account	Total Pay		Amount of Field Allowance	P. F. Allowance	Messing	Subsistence	Total	AL

SUNDRY PAYMENTS

Date		Cheque No.	Particulars

R. 150 A.C.

Mac Millan

Surname MacMILLAN,

Rank Lieut,

Promotion

Unit Officers Dft to C.M.S.

Place of birth Prince Edward Island, Canada.

Married (Yes or No)

Appointments

Christian Names Michael Allan.

Name and Address of Next-of-Kin Mother.

Mrs. Mary I. MacMillan.

205, Kent Street, Charlottetown, Prince Edward Island

AFB 158

I.C.M.R

Date of leaving Canada 23.9.16 & 7.10.16 Date and Cause of Resignation

Report		Record of Promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.			REMARKS Taken from Official Documents
Date	From whom received		Place	Date	
		TAKEN ON STRENGTH & POSTED TO GEN. LIST			
20/10/16	GOC 2D	detailed to CMS.		6/10/16	D05463
24.12.16	Bright O/C	ceases to be att CMS on completing course & att 196 Bn		29.12.16	R0716 apptd (Pte) ord 184. 196 Bn)
18.1.17.	Crowborough 1st Bn	Having completed the 21st Regular course at the C.M.S. is granted certificates and Posted to the 196th Bn.		29.12.16.	R.O. 231.
27.1.17.	C.M.R.	having arrived from England as Reinforcements is T.O.S. Pte C.M.R.		19.1.17	Pte ord. 8. (1st C.Bn. C.M.R)
16/1/17	19 Bn	ceases to be att on draft to I.C.M.R.	Field	16.1.17	Pte O.16
14.4.17	C.R.O	Reported from G.H.Q. Killed in action		~~9/10.4.17~~	C.L. 648.
				9.4.17	P ord. 38. 1st CMR
					CL671 (AFB 109-93. 209 OA) Estab. 8.6.17

A.F.B. 103. 3-FEB.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					