

REGIMENTAL DOCUMENTS

NAME **ARMSTRONG.** *Albert. Percy.* REGT. No. *20292.* UNIT *10th battn* H. Q. FILE No.

[illegible]

DUPLICATE.

Army Form B. 178.

**To be used for recruits enlisting direct into the Regular Army only.
Army Form B. 178^A to be used for Special Reserve recruits and
Special Reservists enlisting into the Regular Army.**

MEDICAL HISTORY ofSurname Armstrong. Christian Name Albert Percy.

TABLE I.—GENERAL TABLE.

| | | | |
|---|--|------------------------------------|----------------|
| Birthplace ... Parish | <u>Bolton</u> | County | <u>Ontario</u> |
| Examined ... | { on <u>10th</u> day of <u>Sept.</u> 191 <u>4.</u> | | |
| | { at <u>Valcartier.</u> | | |
| Declared Age ... | <u>32.</u> years | days. | |
| Trade or Occupation ... | <u>trainman.</u> | | |
| Height ... | <u>5</u> feet, | <u>8½</u> | inches. |
| Weight ... | <u>155.</u> | lbs. | |
| Chest Measurement, { | Girth when fully Expanded. | <u>36</u> | inches. |
| | Range of Expansion. | <u>39</u> | inches. |
| Physical Development ... | <u>good.</u> | | |
| Vaccination Marks { | Arm ... | Right | Left |
| | Number ... | <u>2.</u> | |
| When Vaccinated ... | <u>Sept. 1914.</u> | | |
| Vision ... | R.E.—V= | | |
| | L.E.—V= | | |
| (a) Marks indicating congenital peculiarities or previous disease ... | (a) | <u>Birth stain above R. groin.</u> | |
| (b) Slight defects but not sufficient to cause rejection ... | (b) | | |
| Approved by (Signature) | <u>G. C. Gliden.</u> | | |
| (Rank) | <u>Capt.</u> | | |
| | Medical Officer. | | |

| | | | |
|-----------------------------|--|--------------|--|
| Enlisted ... | { at <u>Valcartier.</u> | | |
| | { on <u>22nd</u> day of <u>Sept.</u> 191 <u>4.</u> | | |
| Joined on Enlistment ... | Corps. | Regtl. No. | |
| | <u>103rd Calgary Rifles.</u> | | |
| Transferred to ... | <u>10th Batt.:</u> | <u>20292</u> | |
| Became non-effective by ... | | | |

on _____ day of _____ 191 .

(Signature) _____

(Rank) _____

Check List in the case of Warrant Officers treated in quarters.

marks 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

Influenza

C.P.T.

Table III.—Boards; Courts of Inquiry, 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.

[illegible]

Table IV.—Service Table.

[illegible]

Name **Armstrong A.P.** RankReg. No. **20292**Unit **10th. Battalion.**Next of Kin **Canada.**

PL 25-A-294

| Date | Movement | Place | Casualty | List No. | Notified N/K O. | W.O. List |
|----------|-------------------|-------|----------|----------|-----------------|-----------|
| 22/26/15 | Reported Missing. | | | 64 | 24/5/15 | |
| 10/1/16 | DA & S | G.D. | | | | |

[illegible]

No. 20292. RANK Pte

NAME Armstrong A. P.

T. O. S.

UNIT 103rd Regt., Calgary Rifles.

M. D. 13

| PAID FROM | PAID TO | SIC OR REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|--------------|------------|--------------------|---|------------------------------------|
| | | | PARTICULARS | AUTHORITY |
| 1914 | 1914 | | | |
| Aug. 13. | Aug. 25 | ✓ | now shown on 10 th Sn. payroll | 10 th Sn. Sept. payroll |
| Aug. 26. | Sept. 21 | ✓ | | |
| Sept. 22. | Oct. 31. | ✓ | | |

UNIT SAILED
OCT 3 1914

Name **Armstrong, A.P.** Rank

Reg. No. **20292.**

Unit **10th Battn.**

25-A-294.

Next of Kin **Canada.**

| Date | Movement | Place | Casualty | List No. | Notified N/K.O. | W.O. List |
|-----------------------------------|-----------------------------------|-------|----------|----------|-----------------|-----------|
| 24-5-15. 22/26-4/15 | reported Missing. | | | 64 | 24/5/15 | |
| 22-4-15. | Presumed to have Died on or since | | | A457. | | |

424.

ARMSTRONG, Albert, P. Pte. No. 20292, H.Q.649-A-144.

Orig for 14/15 star.

10th Bn

MEDAL. (brother) R. Armstrong, Esq., ~~R.M.D. No. 1,~~
~~Box 133, Rocommen, Mich. U.S.A.~~

Decorations

~~5325 Lakewood Av. Chicago Ill.~~
~~U.S.A.~~
1312 Argyle St.

PLACQUES. (brother)
(Serial 801906)

As above. *5/12/21 MRC.*

C. OF S. (Sister) Mrs. Mary Kennedy,
Bolton, Ontario.

Recd 13 2/20 C1530-

OK for

NAME REG. NO. FILE NO.

DATE IN DATE OUT P.A. OR B.F. DATE REQUIRED REMARKS

Scroll Desp. JUL 28 1921 Reqn. No. 8 R 9 921 751261
 Plaque Desp. JAN 26 1922 Reqn. No. 4668

12/19/21
 B.M.

Scroll Map 17-1-23 22323

Surname

Christian Name or Names

Reg. No.

Armstrong

Unit

A.
10th BnP.
Co.20292
Troop BattyPlé.
Hospital

Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1)

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

Prev rept: Missing now for off. purposes presumed
to have died on or since 22. 4. 15

DISPOSITION

Date

ch. 20. 9. 16 # 1457

REMARKS

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

SURNAME.

Armstrong

649-A-144

CARD NO.

CHRISTIAN NAMES

Albert Percy

FOLL.

D

REGL. NO.

29292

RANK

Pte.

UNIT

10th

FORMER CORPS

48th Regt.

Bn.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Armstrong, Levi

RELATIONSHIP TO SOLDIER

Not stated

ADDRESS

Bolton, Ont.

COUNTRY OF BIRTH

Canada Peel, Ont.

DATE

Apr. 1882

PLACE OF ATTESTATION

Valcartier, P. Q.

DATE

Sep 26th 1914

O/S. 4-10-14. 10/4

L. L. 94504. M. & D. 6512.

M. F. W. 22. 250M.-2-16. H. Q. 1772-39-339.

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

MARRIED

SINGLE

Yes

WIDOWER

TRADE OR CALLING

Trainman

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

32

YEARS

8

MONTHS

HEIGHT

5

FEET

8

INCHES

CHEST MEASUREMENT

36

INCHES

EXPANSION

4

INCHES

COMPLEXION

Medium

EYES

Blue grey

HAIR

Light brown

DISTINGUISHING MARKS

Birth stain above right groin.

MEDICAL EXAMINATION.

PLACE

Valcartier, P. Q.

DATE

Sep 5th 1914

Present Address

Not stated

NAME

RANK AND CORPS

CABLE

NO.

DATE

NATURE OF CASUALTY

H. Q. FILE No. 649-

a-144

REGT'L. No.

20292.

NO.

746

FOLL.

C. 1386 21/5/15 Missing.
 U. F.B. 2090 C 25-9-16 Prev. rep missing now for office.
 Cas. Branch Rep. purposes presumed to have died on or
 10.5.16 since 22/26th April 1915.

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

✓ 64

2457

Missing
Prev. rep. missing now
for offic. purposes presumed
to have died on or since
22-4-15

520
R
Number. 20292 Rank. pte

Surname. ARMSTRONG Deep

Christian Names. Albert Percival

Unit 10th Bn Can Inf Theatre of War

Dates of Service 17-10-14-15-2-15-22-4-15 D

Remarks. Brother

Latest Address. B. Armstrong

1312 Angyle St
Chicago USA 5325 Lakeview Ave
Chicago Ill. U.S.A

Roll No. 10 page 418

DESP. DEC 13 1924
REGN. NO. 3811

NAME ARMSTRONG, Albert Percy

Regimental No. 20292

Name and address of next-of-kin

Unit 10th Battalion "B"

Levi Armstrong,

Date of enlistment Sept. 22nd, 1914

Bolton, Ontario.

Place of birth Peel, Ontario

Married (yes or no) No

Date and place discharged

Amount of pay assigned monthly \$

Reason for discharge (Missing) Off. Pres. Dead

To whom payable

Character on discharge

22-4-15

20/9/16

| 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 | | | | | |
| 1914 | | | | | | | | | | | | | | | | |
| Sept 22 | Oct 31 | 40 | 1- | 40 - | 40 | 10 | 4 - | | 44 - | | | | | | | |
| Nov 1 | Nov 30 | 30 | 1- | 30 - | 30 | 10 | 3 | 44 - | 77 | | | 60 | | | 60 | |
| Dec 1 | Dec 31 | 31 | 1- | 31 - | 31 | 10 | 3 10 | 17 | 51 10 | | | 145 | | 220 | 47 20 | 2 days pay absent |
| Jan 1 1915 | Jan 31 | 31 | - | 31 - | - | - | 3 10 | 39 | 38 - | | | - | | | - | |
| 1-2-15 | 28-2 | 28 | " | 28 | 28 | " | 2 80 | 38 | 168 80 | | | - | | | - | |
| 1-3-15 | 31-3 | 31 | " | 31 | 31 | " | 3 10 | 68 80 | 102 40 | | | 6 | | | 6 | |
| 1-4-15 | 30-4 | 30 | " | 30 | 30 | " | 3 | 96 90 | 129 90 | | | 6 | | | 6 | |
| 1-5-15 | 31-5 | 31 | " | 31 | 31 | " | 3 10 | 123 90 | 158 | | | - | | | - | |
| 1-6-15 | 30-6 | 30 | " | 30 | 30 | " | 3 - | 158 | 191 - | | | - | | | - | missing 22/06/15 |
| | | | | | | | | 191 | 191 00 | | | | | | | |
| | | | | | | | | | 119 50 | | | | | | | |
| | | | | | | | | | 115 10 | | | | | | | |
| | | | | | | | | 3 12 | 118 22 | | | | | | | |
| | | | | | | | | | | | | 119 22 | | | | |

71 50 71 50 65 days credited
Trans to Dead Regor

440 440
CHECKED BY
DATE SEP 8 1915
CANADIAN CONTINGENTS

Cash found in effects MR

440 440
O'Donoghue
21/10/16

Statement
SEP 30 1915
not rendered

W. E. Beh

W. E. Beh Sept 16

W. E. Beh Sept 1916. adj. of exchange.

Nov 16

[illegible]

PARTICULARS OF SERVICE

CANADIAN EXPEDITIONARY FORCE

20292, Private Albert Percy ARMSTRONG

1. Born at Peel, Ontario April 1882 (day not recorded).
2. Enlisted at Calgary, Alta. with the 103rd Regiment Calgary Rifles August 13, 1914.
3. Transferred to 10th Battalion September 22, 1914.
4. Embarked for Britain, October 4, 1914
5. Proceeded to France, February 7, 1915.
6. Missing, presumed dead, April 22, 1915 at the Battle of St. Julien in France.
7. Service Awards: 1914-15 Star
British War Medal
Victory Medal

NZ
for Head
Canadian Forces Records Centre

OTTAWA, August 25, 1977

Wors.

CHANGE OF ADDRESS.

Received

No. 20292 Rank Plt Surname Armstrong Christian Names A.P.

Address R. Armstrong
1312 Argyle St.,
Chicago, Ill., N La

649-a-144.

D-19.

EBM.

Section Nat

ATTESTATION PAPER.

No. 20292

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... *Albert Percy Armstrong*
2. In what Town, Township or Parish, and in what Country were you born?..... *Peel, Ont.*
3. What is the name of your next-of-kin?..... *Levi Armstrong*
4. What is the address of your next-of-kin?..... *Bellon Ont.*
5. What is the date of your birth?..... *April 1882*
6. What is your Trade or Calling?..... *Trainman*
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?..... *48th Toronto*
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*

A. P. Armstrong..... (Signature of Man).

S. R. Caldwell..... (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Albert Percy Armstrong*, 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.

Date *22 Sept* 1914. *A. P. Armstrong*..... (Signature of Recruit)
S. R. Caldwell..... (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Albert Percy Armstrong*, 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.

Date *22 Sept* 1914. *A. P. Armstrong*..... (Signature of Recruit)
S. R. Caldwell..... (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 *Peel, Ont.* this *26* day of *Sept.* 1914.

Robert L. Boyle..... (Signature of Justice)

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

R. L. Boyle..... (Approving Officer)

219
Description of Albert Armstrong on Enlistment.

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

Height 5 ft. 8 ins.

Burth Strai above right groin

| | | |
|----------------------------|-------------------------------------|---------|
| Chest measure- ment. | Girth when fully ex- panded..... | 36 ins. |
| | Range of expansion.... | 4 ins. |

Complexion *med*

Eyes Blue - Grey

Hair Light 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* his for the **Canadian Over-Seas Expeditionary Force.**

Date Sept 5 1914.

Place Vol Kertner

"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.

.....*J. A. Cushman*.....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.

..... (Signature of Officer)

Date Sept. 26 1914.

Casualty Form—Active Service.

Regiment or Corps 10th BattalionRegimental No. 20292 Rank Pte. Name Armstrong, Albert PercyEnlisted (a) 22/9/14 Terms of Service (a) 1 year Service reckons from (a) 23rd Sep 1914

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 | | | | |
| 19/5/15 | O.C. 10 th Batt. | Missing | Field | 23/4/15 | A.F.B. 213. |
| 20.9.16 | O.C. 10 th Batt. | Presumed to have died on or since | | 22.4.15 | Chod. 257 |
| | | | | | for Colonel i/c Records, Lieut. Col. J. H. Charter |

[Signature]
 CAPT.
 OFFICER i/c RECORDS
 CANADIAN SECTION G. H. Q.

(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 | | | | |
| | | | | | |

Rank and Name ARMSTRONG Albert Percy

Regimental No. 20292

Name and Address of Next-of-kin

Unit 10th Battalion

Levi Armstrong.

Date of enlistment Sept. 22, 1914.

Bolton, Ont.

Place of birth Ontario

Married (Yes or No) No

Date and place of discharge

If in Permanent Force

Reason for discharge

Character on discharge

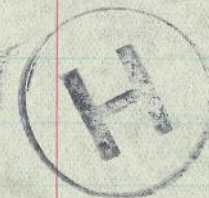
Promotions or appointments

N/E R. B. 4

| 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 | | | | |
| 21.5.15. | M.O. | Missing | | | |
| 23.5.15 | 10 th B ⁿ | Strength struck off (Missing) | 3 rd Echelon. | 22 nd to 26 th 4.15 | Cas Rept #64.01. P.T. D.O. 13 |
| 5-12-14 | O.C. 10 th | Forfeits 2 day's pay | Sling Plantation | 35/11/14 1/12/14 | P.T. II 0 #541 |
| 20.9.16 | X. O.C. 10 th | Presumed to have died on or since. | France | 22.4.15 | L.A. 257 |

21277

X



[illegible]

MEDICAL HISTORY SHEET.

26

ORIGINAL

Surname Armstrong Christian Name Albert P. Percy

Examined { on 10th day of Sept 1914
at Valcartier

Birthplace { City or Town Bolton
County Ontario

Apparent age 32

Trade or occupation Trainman

Height 5 Feet 8 1/2 Inches

Weight 155 Lbs.

Chest measurement { Minimum 36 inches
Maximum expansion 39 inches

Physical development Good

Small-Pox Marks —

Vaccination Marks { Arm Right Left
Number 2

When Vaccinated last Sept 1914

(a) Marks indicating congenital peculiarities or previous disease Birth stain above R. groin

(b) Slight defects but not sufficient to cause rejection —

Approved by H. C. Shindon

Rank Capt M.O.

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

| Date | Result | VACCINATIONS. |
|------|--------|---------------|
| | | M.O. |
| | | M.O. |
| | | M.O. |

| Date | Result | ANTI-TYPHOID INOCULATIONS, ETC. |
|------|--------|---------------------------------|
| | | M.O. |
| | | M.O. |
| | | M.O. |

Enlisted on 12th 22nd day of Sept 1914 at Calgary Valcartier

| | CORPS. | REG'T L NUMBER. | HABITS. | DATE. |
|----------------------|------------------------------|-----------------|----------------|-----------------------|
| Joined on enlistment | <u>103rd Calgary Rifles.</u> | <u>20292</u> | <u>Smoker.</u> | <u>Sept 12th 1914</u> |
| Transferred to.. | <u>10th Batt.</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.

Entries in Red Ink made from Attestation Sheets.

JUL 14 1915

R. M. Shaw
for D. D. M. S.

| 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 com- pletely 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 | | | | |
| Shing Shan-tien | | 29 | 12 | 14 | 2 | 1 | 15 | Influenza | 5 | Influenza | C.P.S. |