CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

	BEFORE ATTESTATION.
1. What is your name?	Prchibald Taylor
2. In what Town, Township or Parish, and in what Country were you born?	
3. What is the name of your next-of-kin?	mother- many Taylor
4. What is the address of your next-of-kin?	423 Willy 8t Fort Willia
5. What is the date of your birth?	22. May. 1883.
6. What is your Trade or Calling?	Brokleyer.
7. Are you married?	710
8. Are you willing to be vaccinated or re- vaccinated and Inoculated a	y ylo.
9. Do you now belong to the Active Militia?	76
10. Have you ever served in any Military Force? If so, state particulars of former Service.	no
11. Do you understand the nature and terms of your engagement?	The
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?	glo
CANADIAN OVER-SEAS EXPEDITIONARY FORCER)	a Jarlor (Signature of Man).
	Free (Signature of Witness).
Date OATH TO BE TAKEN BY I, Orchitated Jaylor bear true Allegiance to His Majesty King George t in duty bound honestly and faithfully defend His M Dignity, against all enemies, and will observe and of and of all the Generals and Officers set over me. So	
00 0 15 Fro	(Signature of Recruit)
Dato 2. 9- 15. 191. The	(Signature of Witness)
CERTIFICATE	OF MAGISTRATE.
questions he would be liable to be punished as proving The above questions were then read to the Real I have taken care that he understands each questions and the said Recruit has	the that if he made any false answer to any of the above ded in the Army Act. eccruit in my presence. uestion, and that his answer to each question has been made and signed the declaration and taken the oath day of
· I certify that the above is a true copy of the	Attestation of the above-named Recruit.
	boombined (Approving Officer)
	MAJOR OMNANDENG 44th OVERSEAS Br. C. R.F. FOR O. C. ON LEAVE.

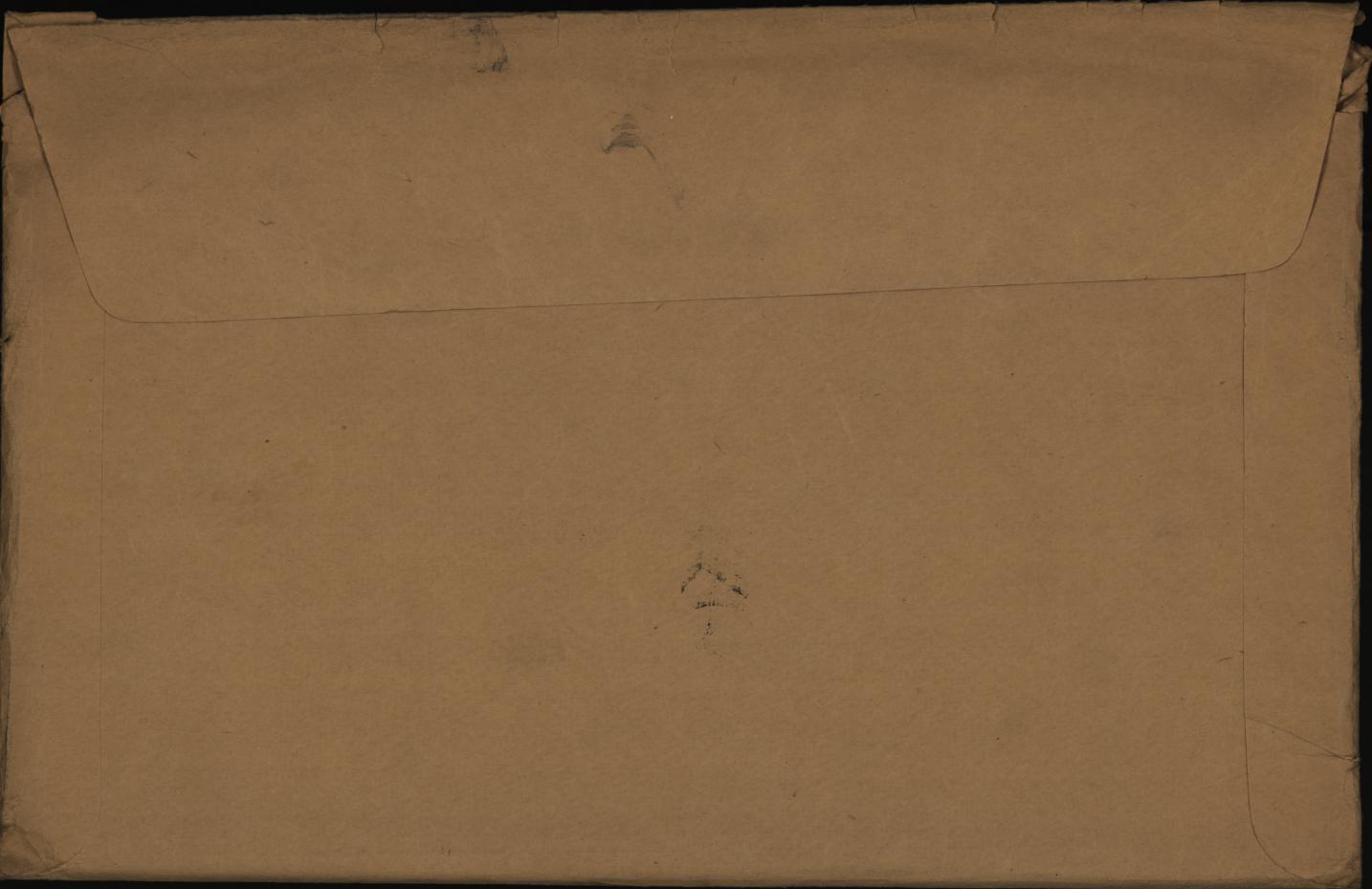
Description of Archibaed Taylor.

on Enlistment.

Apparent Age	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 ft. 4 ins.	
Girth when fully expanded ins. Range of expansion 22 ins.	
Complexion Flesh	Operation mark on
Eyes Brown	Stormal
Hair Dark.	Stomach.
/Church of England	and the manufacture of the second
Presbyterian	
g Š Wesleyan	
Wesleyan Baptist or Congregationalist Other Protestants	
Wesleyan Baptist or Congregationalist Other Protestants (Denomination to be stated.) Roman Catholic	
Jewish	
He can see at the required distance with eithe free use of his joints and limbs, and he declares that I consider him*. for the Canad Date. 1913 Place 1915 Place 1915	r eye; his heart and lungs are healthy; he has the
CERTIFICATE OF OFFIC	ER COMMANDING UNIT.
Archibato Jan	having been finally approved and
	f Attestation, and every prescribed particular having
been recorded, I certify that I am satisfied with the c	forrectness of this Attestation.
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(Signature of Officer) MAJOR
Date 191 2 2 191 001	MMANDING 44th OVERSEAS Be. C. R. F. FOR O. C. ON LEAVE

REGIMENTAL DOCUMENTS

2/8/19	K. NAME TAYIOR and	ald	REGT. NO. 622 985	UNIT 705lander 8	EH. Q. FILE NO	
7	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	The second second second	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
11	TTESTATION PAPER (M.F.W. 23, 133, or 51)					
_k	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					DEATH
100	TRAINING HISTORY SHEET (M.F.W. 113)		(RA			Category
_1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)		1 3			
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)	Resilvation (Control		<u> </u>		2
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					- American and the second
_2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)		The second secon			1
	DENTAL HISTORY SHEET (M.F.B. 465)					DISCHARGE
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)	10 K-1/2 (1) (1) (1)	THE RESERVE THE PROPERTY OF THE PARTY OF THE			Category
	MEDICAL EXAMINATION (M.F.W. 129)			-		Demol
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
<u> </u>	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)		THE RESERVE OF THE PARTY OF THE			
-	LAST PAY CERTIFICATE (M.F.W. 44)					DESERTION
	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
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W. 258 100M -11 1772-33-	-18 1327			COATE A COATE		



FORM R. 149. 7106-250m-7/2/17. Unit 27th Battalion & am & 3269 # Reg. No. 622985 Canada Next of Kin Notified Casualty Place Movement N/K O. 1947 7-5-17 No 3 Can Gen Hosp Boulogne Trench Fever A518 15-7-17 No 7 Con.Depot Boulogne do A576 15-8 Discharged to 3 R.C. do A604 18-8 No 3 C an en Hosp Boulogne Polypi Nose A6

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Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
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01	-1		REGT'L. No. 622 985				
NAME /	rylor	C.	H. Q. FILE No. 649				
RANK AND CORPS		£ 3 4	AR A BANK				
No.	DATE	NATURE OF CASUALTY	V. No.				
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L. L. 31493.	M. & D. 8476.		M. F. W. 42—100m.—28-11-17. H. Q. 1772-39-893.				

DATE OF LIST No. HOSPITAL **ADMISSION** REMARKS a. 214 Disch. 11-5-18 ...

NAME	Ju	ulor a	REGT. No.	622985
RANK AN	D UNIT	at .	Ca arme	422985' smed bry
NEXT OF	KIN		0	(34)
CAB	LE			
No.	DATE		NATURE OF CASUALTY	
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				M. F. W. 42—100 M.—8-18. H.Q. 1772 39-893.

DATE OF ADMISSION LIST No. HOSPITAL REMARKS

622985 Rank Units 27 Bu Can In Theatre of War 7 Date of Service 15-4-16 Remarks. Latest Address nlayson St. Roll No. 200m. -2-21. M. age 1034

6 MON

Name Tay Lor Rank le Unite Am. c. 3 Gm. Next of Kin leaneda

Reg. No. 622985

Date 8 Movement Place Casualty List No. Notified N/KO. W.O. List No. 1/KO. W.O. List N	-		The Park of the Pa			A. Committee	
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	and the second		commission of	PARTICIPATE OF THE PARTY OF THE	- Williams	and the same	THE RESERVE THE PERSON NAMED IN
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Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
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H. Q. FILE No. 649-RANK AND CORPS ple FOLLOWS 27 th Battalion NO. CABLE NATURE OF CASUALTY DATE No.

L. L. Job 8885-M & D. 7146.

REGT'L NO 622 985

FOLLOWS

M. F. W. 42-25M -4-10-16. H. Q. 1772-39-893.

DATE OF ADMISSION LIST No HOSPITAL a 371- Rep. from Base to Fld amb. 4-10-16. Sick d. a 3712 " " Rej. Unit 15-10-16 " a 5.18 hs. 3 Can. Sew, Boulogne 7-5-17 Trench fever 9574 To 76 ons Dep Boulogne 15:717 Trench fever a 6 8H Mo 3. Can esen Boulo and 18.8 17. Polphi nose a 543 Disch to 3 Large Rest Bamp 10-8-17 Trench Sever -

	Reg. No.
Taylor a 62	2 985
Rank Unit Co. Troop	
1.0.	came.
	ate of Admission
	15.7:17
	18-8-17
1, 11/1	. 30 - 4 . 18
- 2 0 0 1 1	14-19-18
1.10	
Diagnosis Rich & Youch Fever. R	
Tetan Diagnosis (if shanged)	
(2) Colphi lose gt	
(3) Additional Diagnosis: if more than one state present	1
P.U.O. of 1CT. P. Hand . No	-
DISPOSITION	Date
	Date
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Boh. of D.G.M.S. O.M.F.C. London

EPITOME OF HOSPITAL TREATMENT.

1.	Hospital		Adm
2.			
3.			
4.			
5.			
6.			
7.		Marie Ma Marie Marie Ma	

For attaching to Criginal & Triplicate A.P.
No 62298 Ronks Wome Jaylor To man 3rd Olar
Next of kin changed from: Mrs. & McIVEY (Mother) 328 South Bradie St. Fort William. Ort. Can
MPS. J. MCVEY (SiSTER) Fort William. Out. Can
MRS. J. MC VEY (SisTER) Fort William. Ont. Can. To: - 1317 Donald Strut Fort William Ont Can
Authority R.L. 29/Rd/27-6-18. Clerks: Initials 1998

Name of the second second second which the second of the second

MEDICADRICINATE HEET.

R

Surname	aylor	Christ	ian s	Name	"Ch	chibald
Examined on 23	day of Sep.	£ 1915	Appro	ved by	22.	Stewart
Birthplace City or To	willeam,	g 1		Ranl	C	aptain M.O.
(County	Lecestershir	e long	Date	Fit or Unfit	EXAM	INED FOR RE-ENGAGEMENT,
Apparent age	32					м. 0.
Trade or occupation	Buckley	er				M.O.
Height	5 Feet 3	//>Inches.				
Weight		Lbs.				M .O.
Chart managrament	Maximum expansion 3					M.O.
Physical development	Good					M,O.
Small-Pox Marks	None					м.о.
Vaccination Marks	Arm Right. ——	Left. 3	Date	Result		Vaccinations.
When Vaccinated last	A 1	od Co	12/	· Pa	>	C 31.0.
	congenital peculiarities	or previous				м.о.
disease						M.O.
			Date	Tresult	ANTI-	Typhoid Inoculations, Etc.
(b) Slight defects by	ut not sufficient to cau	se rejection	.00	,	eae	F 10 - 8
			12/	5-11	·ac	М.О.
		Q.	217	1/,		M.O.
			VI:	2/12	V	Cono M.O.
Enlisted on 23	day of Septe	mber	191	5 mm C	Fort	William On
	Corps.	Rmot'l Number		Hanre		DATE.
Joined on enlistment	44th Balt	A23753 622985		Goo	d	Sept 23 191
Transferred to						
EXA	AMINED OR DISC	CHARGED	BY A	A MED	ICAL I	BOARD.
STATION.	DATE.	D	ISEASE.		1	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.

DATES OF 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 laguiny was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations. Date of Arrival Number of days in Hospital. Admission into Hospital. Discharge from Hospital. STATION. Signature at the DISEASE of Medical Officer. Station. Day Month Day Month 16 10 Christian Name. Surname

						Marie Committee of the
	Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as			Remarks
	Date	From whom	reported on Army Form B. 213, Army Form A. 36, or in other official documents. The	Place	Date	taken from Army Form B. 213, Army Form A. 36, or other
0	Date	received	authority to be quoted in each case.	4		official documents.
151	10/17/	anle	Jaken on Strength No	3 Cyc Ilm	14/10/1-	Tile 18871
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		00.1	hom I been Bath			WHI 6 / 10/10/17
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5	11		Discharged to duty	V	19/19/1-	
26/10	7/17	"	To duty (Masal Valyfin)		16/10/17	W3034 9901
ulul	1		Granted 14 days Clave		2/11/17	BOBTH 12 Solution
24	6	1 //	Rejorned Muy	<i>t</i>	11/1	order of a solution
15/11	"7	7		, 0	2/11/17	1237 16 0/0/7
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23.	1. 18.	3 C.G. H.	leave to UK from 2111	11 ho #	12.18	13213. pi 80 0/1918.
	2. 18.	4	Rejource from leave.		5.12.18	
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THE STATE OF	1000000					Capt. for LtCol., A. A. G.
11					Canadian	Section, G. H. O. 3rd Echelon, & E. F.
THE RESERVE OF THE PARTY OF THE						

Nothing to be written in this margin

(24) Miscellaneous entries:-

		SERVICE	AND CA	SUALTY FORM (Part I).	Army Form B, 103-I. Part I.
(1)*Substantative	rank	COLD SECTION	Thirty sind	(2) Regiment or Corps	(3) Regtl. No
*Acting rank					
*[To be entered in p. (4) Surname	encil to facilita	te alteration.]			
(5) Christian Nat	mes				
(6) Army Form,		Attestation)		6 U.1	
Form or Reco	ord of Servi	ce paper)			
(7) Whether of Borigin [vide A				A DE STANDARDO	
(8) Date of birth					
(9) (a)					
(10) Enlistment (6)	9090000 av 60	niska	(11) Engagement (c)	
(12) Service reck	The second second	late)	(13) Special conditions (if any) of enlistment (d)	
(14) Any subseque of condition	ent variati	ions (if any)			Initials and Rank of an Officer.
, ogeogateres			thority)	(date)	EDAN-
(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) (Record of Occupation in Civil life (vide Army	Order 93 of 1917)
****	Par like			Industrial Group No.	
				Trade or Calling	
				Married or Single	
				Particulars of Trade Test	
					,
				Occupation Cards despatched on (date)	
				Second Occupation Card despatched on (date)	
			1	Second Occupation Card despatemed on dates	
(17) Next of Kin (18) Demobilizer	(f)		(Place)		(Signature of
(19) Pivotal-man			(Date)		(Posting Officer
(20) Qualification			or (21) Cor	ps trade and rate	
((23) Re-engaged	
(22) Extended }				(23) 110 01184804	

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [vide A.C.I, 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent. &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoeing-smith, &c.

62298	5-4/01	2 TAYLOR -	A	
Date. From rec	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.1, 1816 of 1917. Corps and unit to which-transferred and posted to be invariably named.	(D) (E) Date Place of promo reduct revers casualty	tion, Remarks, and initials and rank of an officer
26/5/19 R	Wing No 39	T,O,S. SOS, OMFC. TO CEF-, CANA	Willey 241	1/1010
* *		OFFICE	tearsha	
15-7-19 0/	/s.	TOS.DD#4.DIS.Stn."F"	Mon treal .25	-6-19 D.O. pt.11.#195
15-7-19		SOS. DD#4.Demob		219 D.O. pt.11.#195
		4. Spletolic Lieutenant, al Assistant Adjutant, District Depot No. 4.		RO.1420. Othing to
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				margin.
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		Acres 10 Acr		

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TAYLOR Archibald

Reg'l No.

422985

Unit

44th Bn

If in perm. Corps, What Unit?

Married or Single Single

Place and Date of Enlistment Camp Hughes, 22 Sept 1915

Place of Birth Kettering, N. Hants, England

Name and Address, Next-of-Kin

Mary Taylor Wib. 1817 DONALO St. (RL-29-R. 4/27-418)

Relationship

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

	Disc	narge, Date a	ind Place	Reason		Character
	Date From whom received		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
	6		Anxived in England.	Marland	50 OCT	1915
	17.11.15	Аај. ним.	Transpur from B'Co. to 6 6.	Bramshott.	17.11-15	Pari II brans 234.
	17.4.16	n "	8.05.44 BA Tfd 627 BA	France	15.4.16	108.
	7.5.16.	27 wbon	Taken on strength 27 1700	In the fuld	16.4.16.	PFITO 19
		do.	Rep from Base to Field am	l do.	4-10-16.	C. L.a 3 71. Suk
	18-11-16.	do.	Regained Unit.	do.	15-10-16.	do -
	15-5-17	ANDO	adm No3. Can Gen Hosp	Boulogne	7-5-17	EL.A. 518. Trench fever
	24-7-17	- "- 27 Pm	Exto 7 Com Debot Disch to 3 Lange New Hosp.	Bouloano	15-9-17	61A. 576 — .
F			F.O.S. on brans: from 27th Mr	The do.		

622985 Laylor a.

Report		Record of promotions, reductions,			now in the	
Date	From whom received	transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents	
19-10-17 3-11-17. 4.6.19	27 Br. Man: Rogh:	Transferred to NO. 3 Dischd: to Duty. Choceeded to Figland		13-10-17 26-10-17 293 19	8±0.60. 6.1.0.54. 3936	
315-19	KWing	84 - F - 40	Plo Mitty	70 5 19	-H4 -19	
25-6-19	A ring	SOF Do Comuda	OB Withy	25-6-19	-68-	

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 622985 Rank PJE	Surname TAYLOR.
	arshibald (Given name in full)
No. 8 CANADIAN GENERAL HOS. TAL	arshibala
Unit or Corps	Birthplace I Gaslein farms
(Examination of Officer or Other Rank (stri	
I. GENERAL DESCRIPTION:	2 3/
Physique Weight 125 lbs.	Height. 5. ft. Colour of Eyes
Nutrition 3	Identification marks, scars, or deformities.
Pulse 77 Type	(Give cause and date of origin).
Condition of arteries	
Vision Rt. 67.4 Left 9.7	mone
Hearing (conversational voice) Rt. 20.ft.	
Leftft.	
Opinion as to general health and physical condition	Bord .
2. Has Officer or Other Rank ever suffered from, or h (Answer "Yes" or "No") (Subjective evidence	nas he now, any affection of the following systems? e may be sufficient in certain cases.)
Nervous System	System Cardio-Vascular System
Special Senses	system Respiratory System
Disturbance of MentalityMuscular System	Digestive System
Osseous and Joint SystemAny other general	al condition yes
 If the answer to any part of Section 2 above is "Y of origin; and also a description of the present 	es," here give full particulars, with cause and date condition.
20-10-76 6.0.0	& haved
20-12-18 America.	
	STATE OF THE PARTY

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—
Examined at
Date Signed Signed M.O.
I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service. Signature Signature
(If not satisfied, M.F.B. 227 will be completed by Medical Board.)
THIS SECTION FOR USE IN CANADA—
Examined at(Canada)
Date Signed M.O.
I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.
Signature
(If not satisfied, M.F.B. 227 will be completed by a Medical Board.)
(This space to be used, if necessary, in connection with Section 3, overleaf, only.)
The second secon
Secretarian and the second of

[over]

Bervice Badge No.

CANADIAN EXPEDITIONARY FORCE DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 623	2985 (Rank) Gff, enlisted in				
the 44 Btn					
CANADIAN EXPEDITIONARY FORCE at Com-	Lyles on the 18 4				
day of Sext- 1915					
HE served in 27 5 Btn	- GAM.C. IN FRANCE				
	Demobilization.				
and is now discharged from the service b	y reason of Medical Unfitness.				
THE DESCRIPTION OF THIS SOLDIER on t	he Date below is as follows:				
Age 35-9.	Marks or Scars				
Height 5'4	Oper. Mark on Stoward,				
Complexion Fresh.					
Eyes Brown					
Hair DK Hair.					
Waylor	m.				
Signature of Soldier.	97 Disher				
Date of Discharge	Issuing Officer.				
(JUL 5 1919)	Officer Ife Discharge Section, Dispersal Station "F"				
The state of the s	Rank				
· District	Date July 0 19/7				

N B.- AS NO DUPLICATE OF THIS CERTIFICATE WILL BE ISSUED, ANY BERSON FINDING SAME IS REQUESTED TO

FORWARD IT IN AN UNSTAMPED ENVELOPE TO THE SECRETARY, MILITIA COUNCIL. OTTAWA, CANADA.

M.F.B. 39A.

DISCHARGE CERTIFICATE

the state of the contract of the state of th

CANADIAN ARMY DENTAL CORPS. O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

NAME OF SOLDIER (Block Letters) TAYLOR. HRCHIBALD Hoop RANK Date of Examination in England Date of Examination in France 10 11 12 13 23 24 25 26 27

DENTAL OFFICERS

- I. This form will be made out for each individual at the k me of Demobils ration in England
- Figures as per chart will be used to designate teeth
- In reference to Partial Dentures the numbers of teeth thereon wil be stated

PRESENT DENTAL REQUIREMENTS

- 1. FILLINGS
- 2. EXTRACTIONS
- 3. CROWNS
- 4. DENTURES
 - (a) Full Upper
 - (b) Part Upper
 - (c) Full Lower
 - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

- (a) In Canada
- (b) In England
- (c) In France

Signature of Dental Officer.

14 2 Econ For why 142 142 1655 A." more mark of the state of the same of

CERTIFICATE to be rendered in the ca	ase of a Non-Commissioned Officer who					
is to be {posted transferred attached} to the Regular Establishment of any arm of the						
Special Reserve or to the Permanent	t Staff of the Territorial Force, &c.					
The state of the s						
I certify that	The second secon					
	*					
is in every respect competent to undertain	ake and suitable for the duties he will-					
be required to perform as an Instructor i	n the arm of the Special Reserve or the					
Territorial Force to which I recommend	he should be { posted transferred attached					
	Officer Commanding,					
Place						
D						
Date						
DOCUMENTS TO ACC	OMPANY THIS FORM.					
In all cases	Copies of Regimental and Company Conduct Sheets.					
In cases of tradesmen	Certificate of Proficiency on Army Form B. 195 or 195A, as the case may be.					
In case of Clerks (or of any trade if for) Royal Army Medical Corps)	Specimen of handwriting and ciphering.					
In case of Candidates for Military Police	Specimen of handwriting.					
In case of Candidates for the Military Provost Staff Corps	Copy of Record of Service on Army Form B. 200.					

128 South Brodie St.

MILITIA AND DEFENCE

Fort William, ASSIGNED PAY

Ontures OVERSEAS CONTINGENTS

WOV 1- 1915

By Whom Assigned Laylon, A

M. F. W. 12. 20m.—9-15.

H. Q. 1772-39-819.

PAYMENTS

	Month	Year	Cheque No.	Amt.	REMARKS	
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	Sept.					
	Oct.					
	Nev.				(5910)	
	Dec.					
	Jan.	1915				
	Feb.					
	March					
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	May					
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	Aug.					
	Sept.					
	Oct.		\(\)			
	Nov.		39805	20		
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	Jan.	1916	Modia	20 -		
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ASSIGNED PAY

OVERSEAS CONTINGENTS Name of Soldfer Tarker (PAYMENTS. L. L. Job 89002.-R Remarks. Amt. Cheque No. Month. Year. April 1916 May June July Aug. Sept. Oct. Nov. Dec. 1917 Jan. Feb. March April May June 20 S July 20 Aug. Sept. Oct. Nov. Dec. Jan. 1918 Feb. March April May June July

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier

	Month.	Year.	Cheque No.	Amt.	Remarks.	
	Aug.	1918				
	Sept.					
	Oct.					
	Nov.					
	Dec.					
	Jan.	1919				
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	Nov.					
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MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

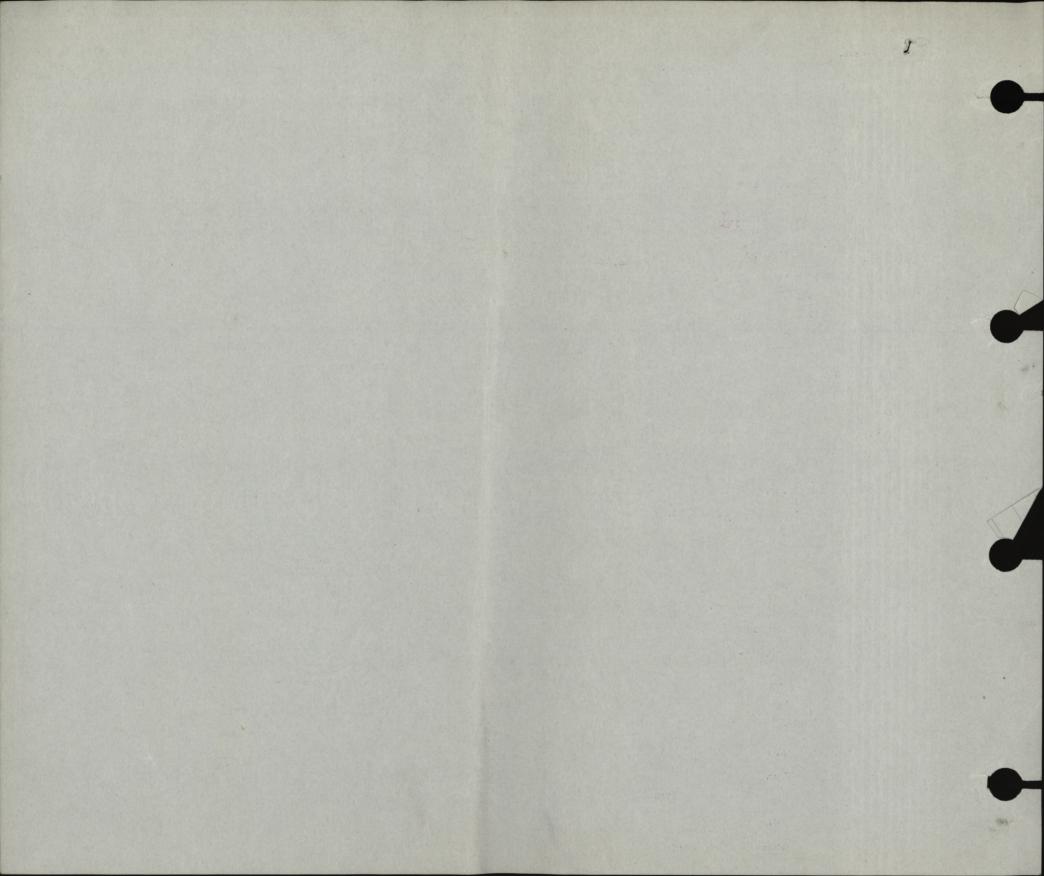
To Whom Mrs. H Taylor. By Whom Assigned Taylor a

Address 328 & Brodie St Regtl. No. 622985

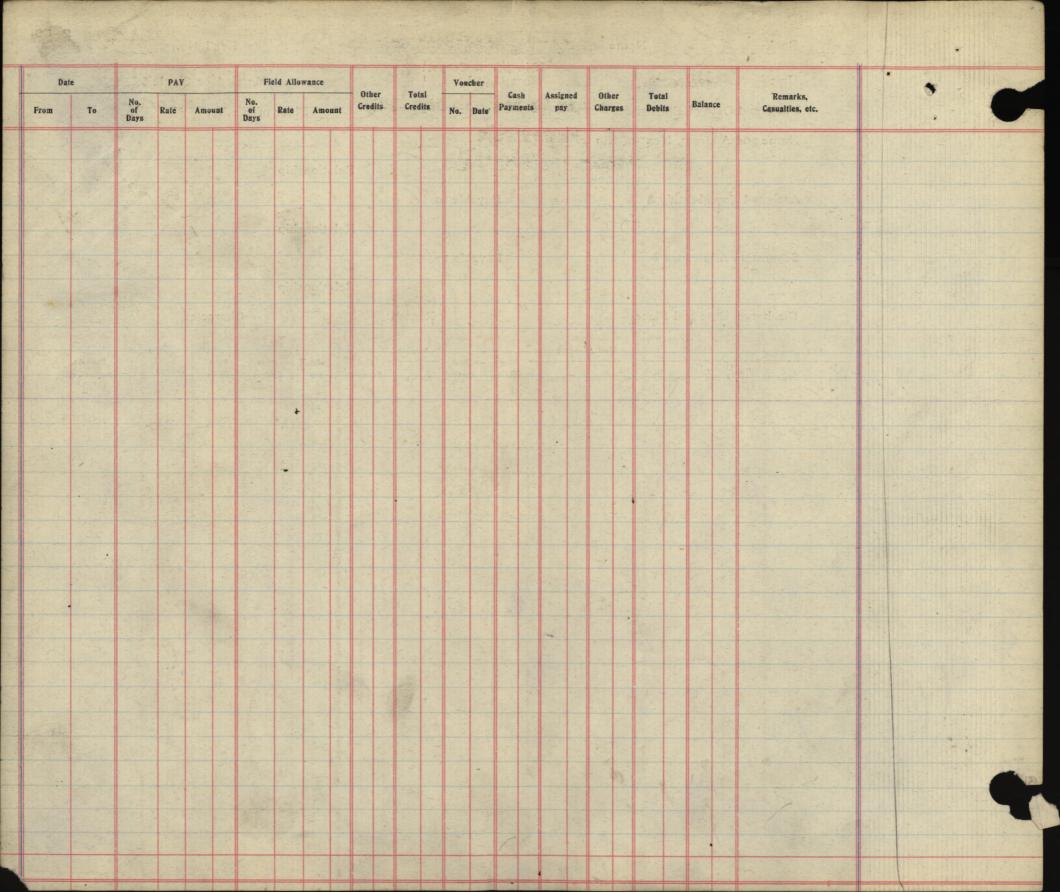
Fort William Rank pte

Ont. Corps 2703n.

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	Month	Year	Cheque No.	Amt.		REMARKS	
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	Dec.						
	Jan.	1916					
	Feb.						
	March						
					1	NAME OF THE PERSON OF THE PERS	



TAYLOR Archibald Reg'l No. If in perm. Corps, ! What Unit? Married or Single Single Unit Place of Birth Kettering, N. Hants, England Place and Date of Enlistment Camp, Hughes, 22 Sept 1915 Mary Taylor Name and Address, Next-of-Kin Mother 423 Wiley St, Fort William Relationship Assigned Pay Monthly \$ 2000 Payable to levely, Welly, Sortweller One Relationship Separation Allowance \$ Payable to Relationship Discharge, Date and Place Reason Character Field Allewance Voucher Remarks. Other Assigned Other Total Total Cash Balance Casualties, etc. Debits Credits Credits Charges Amount 3217 1083 Alothing h. BALANCE TRANSFERRED TO NEW LEDGER. 155 97 21 213 AAB 55 97 /00 15 20 10 .. 177 20 152.



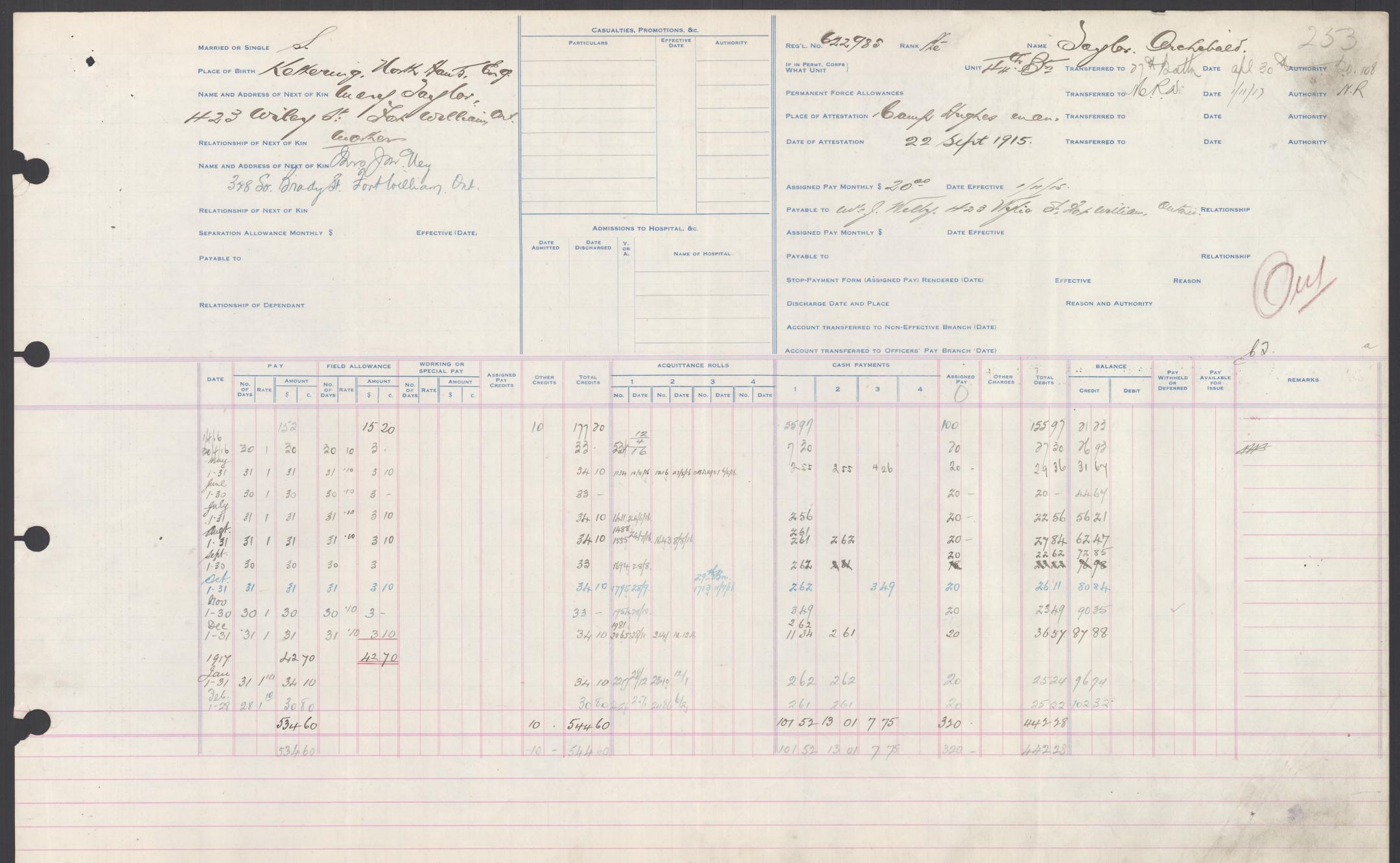
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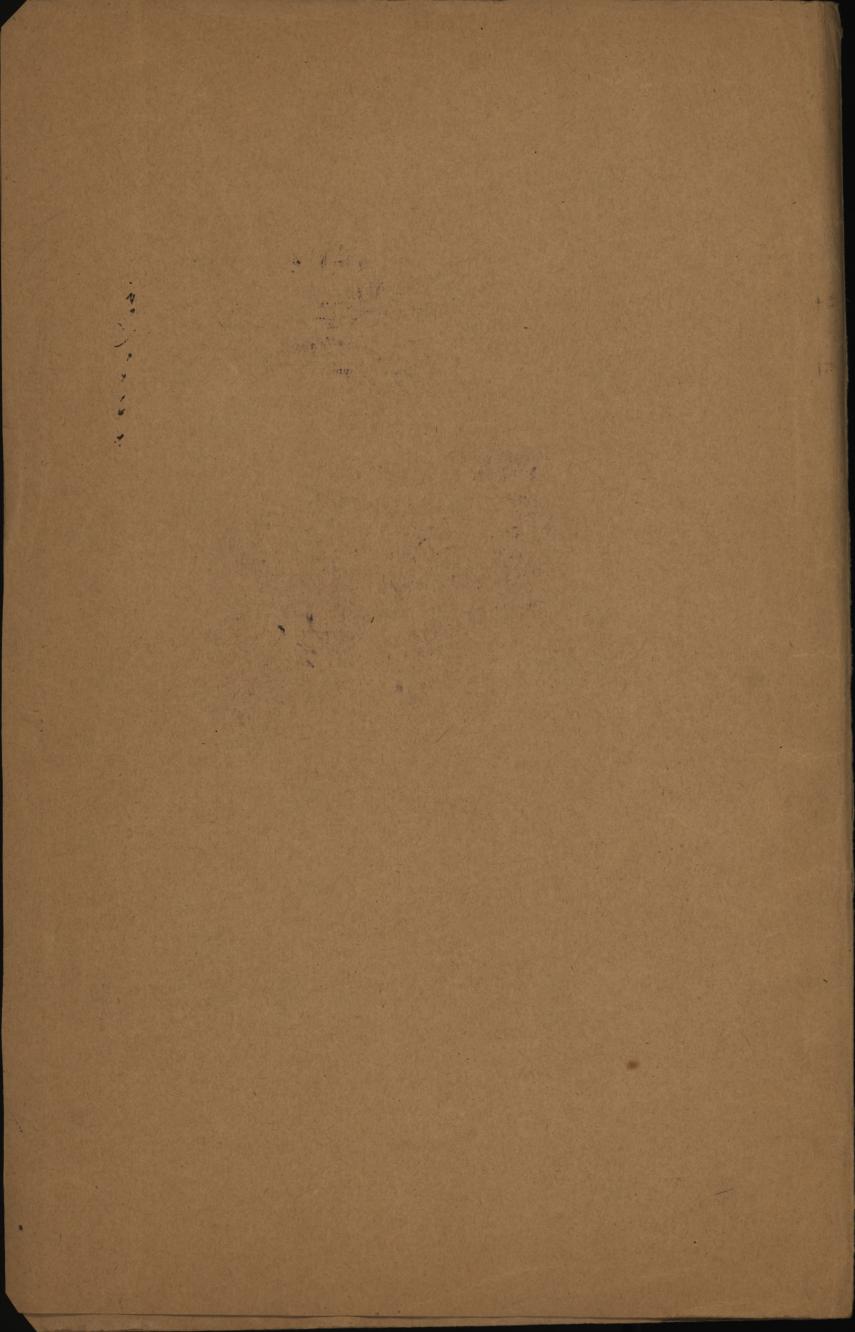
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625985 Jaylor, Archiback
44 Battalion

29-7-37



(13)	
War Service Badge	Class "A" No
	D.A
Regt. No. 808426	Renkin
Name Atenderson.	Wallace
(Surname)	(Christian Name in Pull)
Regt. or Corps	dn.
Unit	
Original Unit.	H-WA Olympic 16-19
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Religionassesses	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Place of Residence. Neglik	low Acta
Documents	
Trip, Attestation Paper	
Casualty Form (A.F.B. 103)	
Medical History Sheet	
Prodeedings of Medical Board	
Dental Certificate (C.A.D.C. 5009))A)
Field Conduct Sheet (A.F.B. 122).	
Proceedings of Discharge (M.F.W.	218A)
Discharge Certificate (M.F.W. 39)	
Special Envelope (M. 260)	
Copy of Discharge Certificate (M.)	F.W. 39A)
Q.M.G. Form D.O.S. 2	
Last Pay Certificate (P. 851)	
Pay Book (A.B. 64)	
War Gratuity (P. 880)	
Dispersal Certificate (C.DL 3)	
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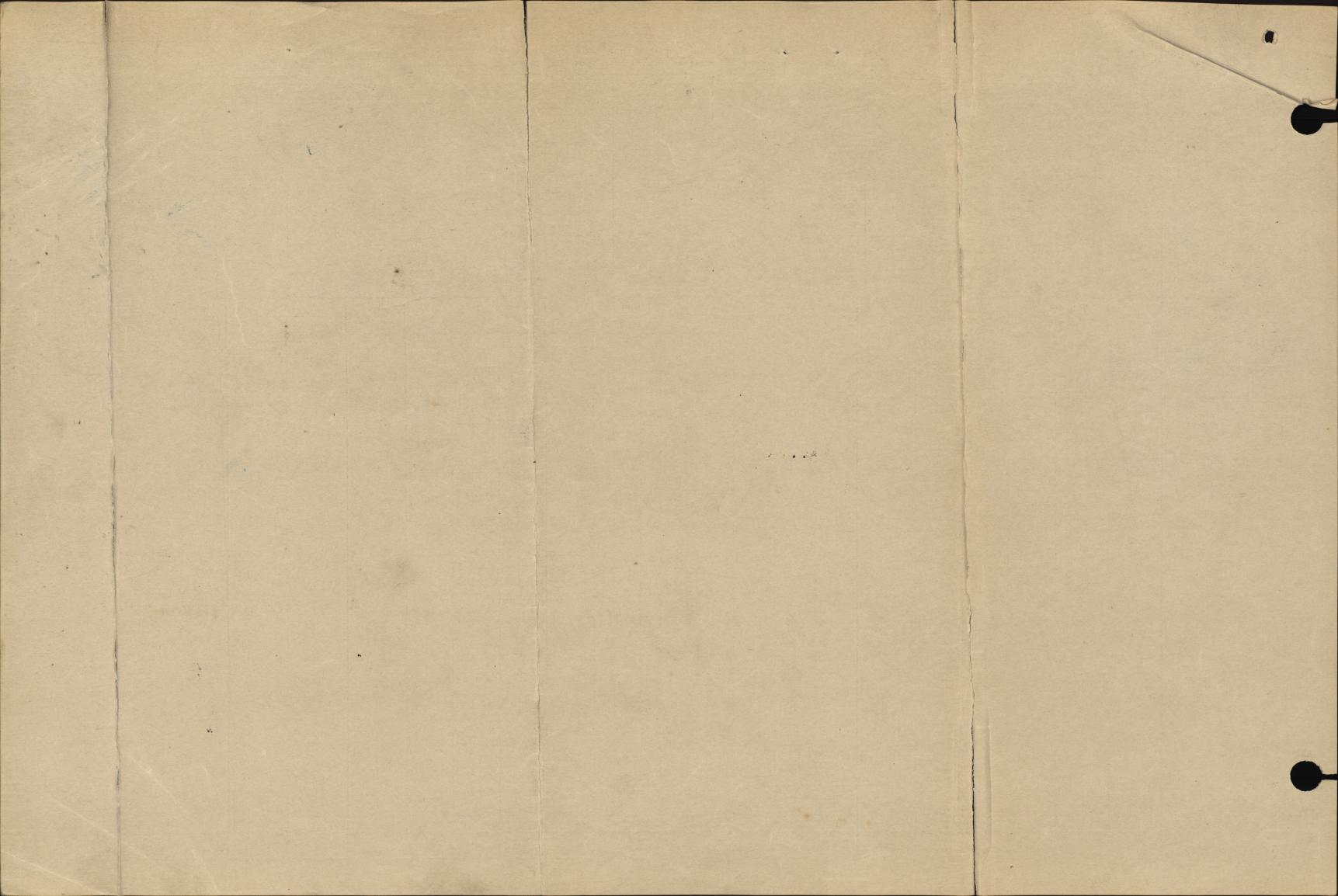
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P.R.2855.

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Cas. sheet 4-10-16. Lo Hosp sick 20 duty 15 16. 18-8-17. Polypi nose 20 duty 26 17. 30-4-18 Influença Lo duty 11-5-18. P. M. O = & CT. Rht Rand 14-12-18. 20-12-18. Lonsilitis 20 duty 20-12-18

AUDITOR PAYMASTEN PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES M. OR S. NEXT OF KIN AUTHORITY PARTICULARS ADDRESS TRANSFERRED TO AUTHORITY DATE OF ATTESTATION TO TRANSFERRED TO AUTHORITY IS SEPARATION ALLOWANCE PAID? DATE EFFECTIVE ASSIGNED PAY \$ DATE EFFECTIVE PAYABLE TO TO WHOM PAID RELATIONSHIP RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS ADDRESS STOP PAYMENT FORM
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PAY DISCHARGED nontreal TARY PAY AND F.A. ACQUITTANCE ROLLS CASH PAYMENTS REGI-TOTAL OTHER BALANCE TOTAL MENTAL CREDITS CHARGES CREDITS DEBITS MONTH NO. OF RATE COL. NO. 1 COL. NO. 2 COL. NO. 3 CHARGES AMOUNT OL. NO. 1 COL. NO. 2 COL. NO. PARTICULARS OR REMARKS CREDIT 20351 2031 35001 487 500 6578 3000 1/6 00 Xaa Krand 200 9220 1100 70001 550 N 10/15 12150 War Service Gratuity W. S. G. S. A. Total Charges W. S. G. S. A. Seldier Dependant Total 4201 12501 99 Al 17841-A-5 & 19/8/19 AR 284-28-4-19-3 Jen Hors extradas 872 Should be 9.13 8/14 41cls 23/8/19 1523150/3 5-10/ 1632969/ 90 10 5.12.19. 420 200m-s-19.—L. ... 58785-... or D. 9985.
M. F. W. 2096.
1772-59-1390.



Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

nov 1-15.

495

RATE OF ASSIGNMENT

RATE OF SEPARATION ALLOWANCE

PARTICULARS OF SEPARATION ALLOWANCE

No. 422985

Rank Ott Promoted Reverted Discharge

Soldier's Name Q. Jaylor

Battalion 44 H. Hallor B. 60.

Relationship

Address

4

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MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RAT	E OF SEPA	RATION A	LLOWAN	ICE

RATE OF	ASSIGNMENT
	1850 85

PARTICULARS OF SEPARATION ALLOWANCE

PARTICUL	ARS	OF	ASSIGNMENT	
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No.	, <u>A</u> -*			Name	
Rank	Promoted	Reverted	Discharge	Address	
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M. F. W. 128 400M.—6-17-1772-39-1141 L. L. 22320—M. & D. 7893.						
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ARMY FORM B. 178.

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital.

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

MEDICAL HISTORY of

Surname	TAYLOR.	Chi	ristian Nam	e	ARC HIBALD.	
		TABLE I.—GE	NERAL T	ABLE.		
Birthplace .	Parish G	reat Eastern	(County	Leicesters	hire.Eng
		(on 23rd.	day of	Septemi	er.	191 5.
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Weight .					lbs	
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sufficient	to cause rejec-	{				
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Approved by	(Signature)	Dr.	Stewart.			,
	(Rank)		Captain.			
					Medical	Officer.
		fat Fort W	illiam Or	nt.		
Enlisted .	08 509 500	on 23rd.	day of	Septi		195
		(on zoru.	Corps.		Regtl. No	manufactions and a second seco
Joined on En	nlistment	44th.Bn.			622985.	
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Fransferred	io					
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S	(Rank)					
	The state of the s	elly	Forms B 178			P.T.O.
/PP00 \ TT 1	1071 05 00 770 1/1	LieutCol	39			

(5506.) W. 14971/M. 89. 750m. 1/16. Charge of Records,
Canadian Contingent.

Table II.—Only for Admissions to Hospital or to the Sick List in

Marra	Nove of IV		ted to H	ospital	Discl	harged Hospita	from	Disease	Number of days	Remarks bearing use. In
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rto the Sick List in the case of Warrant Officers treated in quarters.

Number of days in Hospital	Remarks bearing on the cuse. In cases of subsequent progrebe given in the s	cause, nature, or treatment of the c syphilis, admissions and re-admis sss, including particulars of treatm pecial syphilis case sheet.	ease, likely to be of interest or of future sions to hospital will be shown. The nent out of hospital, transfers, &c., will	Signature of Medical Officer	
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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.

Date	Brief details, and signature								
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