

REGIMENTAL DOCUMENTS

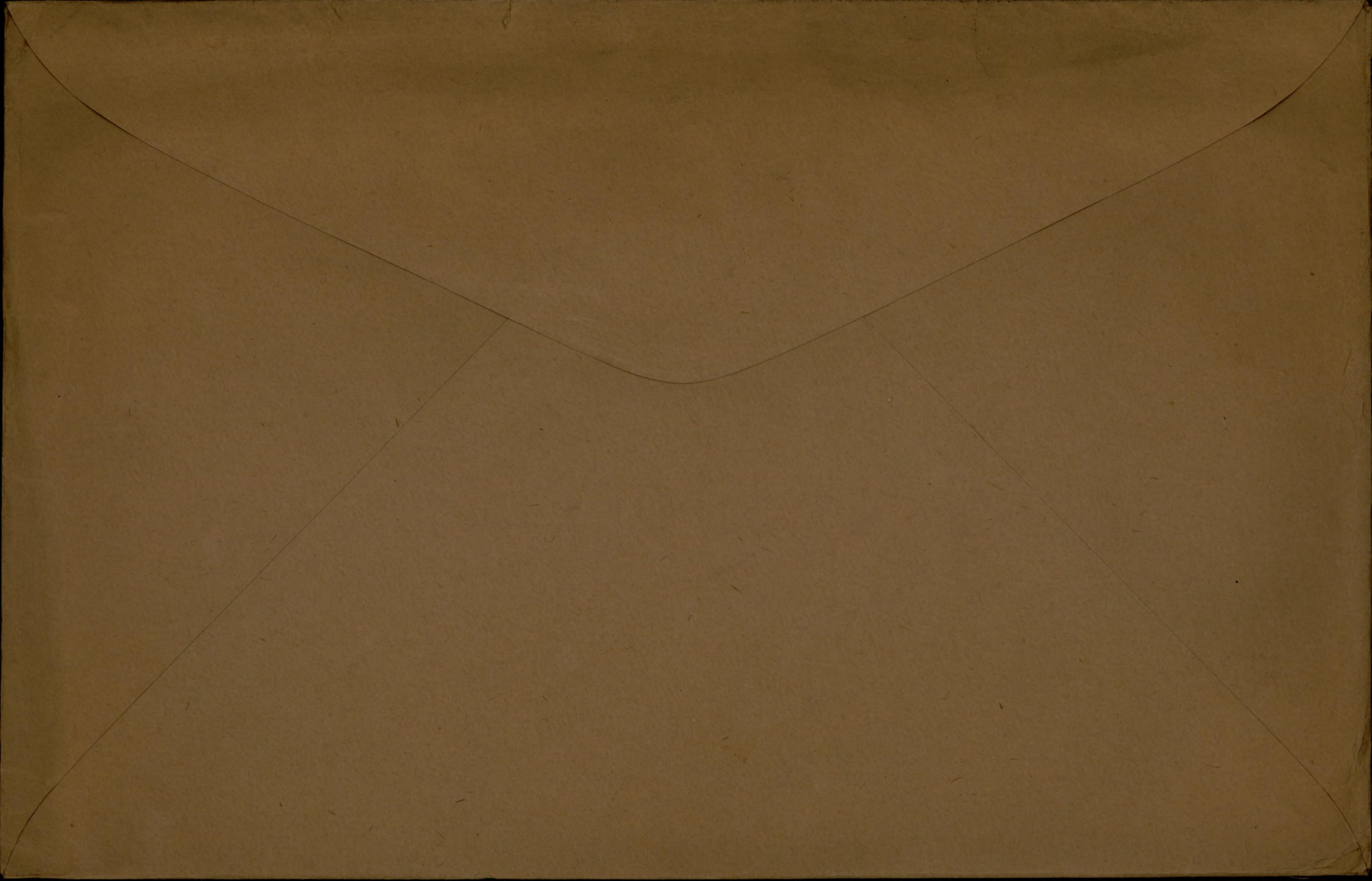
NAME ANGOVE. Samuel Edward REGT. No. 141139 UNIT 46th Battrn H. Q. FILE No.

X625

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CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
3 ATTESTATION PAPER (M.F.W. 23, 133 or 51)		M			DEATH
1 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					CATEGORY
1 TRAINING HISTORY SHEET (M.F.W. 113) <i>Record sheet</i>					<i>Killed in action</i>
1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					<i>3-9-16</i>
REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)		H			
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					CATEGORY
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
MEDICAL EXAMINATION (M.F.W. 129)					
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PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
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LAST PAY CERTIFICATE (M.F.W. 44)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
5 CARDS					
<i>4co</i> PAY-SHEETS					
					15-20
					23-3
					31-3



ATTESTATION PAPER,
76th O'SEAS BATTALION C.E.F.,
CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

No. 141139

Folio.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- 1. What is your name?..... Samuel Edward Angove
 - 2. In what Town, Township or Parish, and in what Country were you born?..... Boburg, Ont.
 - 3. What is the name of your next-of-kin?..... Miss Loretta Angove (Sister)
 - 4. What is the address of your next-of-kin?..... P.O. Boburg, Ont.
 - 5. What is the date of your birth?..... July 29th 1894
 - 6. What is your Trade or Calling?..... Waiter
 - 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?..... No
 - 10. Have you ever served in any Military Force?..... No
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
- Samuel Angove (Signature of Man).
G.P. Morton (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Samuel Edward Angove, 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.

Samuel Angove (Signature of Recruit)
Date July 28th 1915 Z. Hubbard (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Samuel Edward Angove, 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.

Samuel Edward Angove (Signature of Recruit)
Date July 28th 1915 G.P. Morton (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 Sandton this 28th day of July 1915

(Signature of Justice)

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

G.P. Morton (Approving Officer)

Description of Angove Samuel Edward on Enlistment.

Apparent Age.....18.....years.....0.....months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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. 8 ins.

1 - Vacc. left arm

Chest measurement { Girth when fully expanded.....36 ins.
 Range of expansion.....4 ins.

Complexion.....Fair

Eyes.....Brown

Hair.....Brown

Religious denominations. { Church of England.....
 Presbyterian.....
 Wesleyan.....
 Baptist or Congregationalist.....
 Other Protestants.....
 (Denomination to be stated.)
 Roman Catholic.....Yes
 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* fit for the Canadian Over-Seas Expeditionary Force.

Date.....July 28.....1915

Charles East
 (Capt) A.M.C.
 Medical Officer.

Place.....Hamilton

*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.

Samuel E. Angove.....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.

G. P. Martin Capt (Signature of Officer)

Date.....Aug 4th.....1915

Lt. Col.
 Commanding 76th Battalion. C. E. F.

MEDICAL HISTORY SHEET.

Surname Angove Christian Name Edward, Samuel

Examined { on 28 day of July 1915
 at Hamilton
 Birthplace { City or Town Bobourg
 County Ontario

Approved by R. A. Ireland
 Rank Capt. M.O.

Apparent age 18 yrs.
 Trade or occupation Waiter
 Height 5 Feet 8 Inches.
 Weight 145 Lbs.
 Chest measurement { Minimum 32 inches.
 Maximum expansion 36 inches.
 Physical development good
 Small-Pox Marks

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

Date	Result	VACCINATIONS.
<u>Aug 11/15</u>	<u>good</u>	<u>R. A. Ireland</u> M.O.
		M.O.
		M.O.

When Vaccinated last 1906
 (a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>Aug 12/15</u>	<u>good</u>	<u>R. A. Ireland</u> M.O.
<u>6/15</u>	<u>"</u>	<u>"</u> M.O.
<u>10/15</u>	<u>"</u>	<u>"</u> M.O.

Enlisted on 24 day of July 1915 at Hamilton

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment				
Transferred to.. ..	<u>76th O'Leas Battalion, C.E.F.</u>	<u>141139</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.

Casualty Form—Active Service.

man

Regiment or Corps 76th O'SEAS BATTALION C.E.F. Regimental Number 141139

Rank Private Surname Angove Christian Name Edward Samuel

Religion Roman Catholic Age on Enlistment 18 years 11 months.

Enlisted (a) 24/7/15 Terms of Service (a) D of W Service reckons from (a) 24/7/15 ~~28/7/15~~

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

Extended { } Re-engaged { } Qualification (b) Grenade
 or Corps Trade and Rate _____

Edward Samuel
 Signature of Officer i/c Records.

Date	Report From whom received	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
			Embarked ... <u>Halifax</u>	<u>23-4-16</u>	
			Disembarked... <u>Liverpool</u>	<u>5-5-16</u>	
		<u>36th</u> TRANSFERRED TO <u>BATTN. C.E.F.</u> <u>JUL 9 - 1916</u>			<u>H.N. Smith</u> <u>Capt regy.</u>
		<u>2nd</u> TRANSFERRED TO <u>BATTN. C.E.F.</u> <u>JUL 17 1916</u>			<u>W.S. Duff</u> <u>O.C. 36th Battalion C. E. F.</u>
<u>31-7-16</u>	<u>A.A.G.</u>	<u>Taken on strength 2nd Batt</u>	<u>C.B.D.</u>	<u>18-7-16</u>	<u>Part 11 30</u>
<u>27-7-16</u>	<u>C.B.D.</u>	<u>Left to join Unit</u>	<u>On route</u>	<u>27-7-16</u>	<u>N.R.</u>
<u>30-7-16</u>	<u>O.C. Unit</u>	<u>Joined Unit</u>	<u>Field</u>	<u>29-7-16</u>	<u>B 213</u>
<u>4-9-16</u>	<u>O.C. Unit</u>	<u>KILLED IN ACTION.</u>	<u>Field</u>	<u>3-9-16</u>	<u>K.I. 133-1005</u> <u>Part 11 No 42 d/9</u> <u>9-9-16</u>

CERTIFIED CORRECT.
 Canadian Record Office,
 Westminster House,
 7, Millbank, S.W.

(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, Shoemaking, &c.
 (B99130) W 15012-51:6 J. P. & Co., Ltd. Forms B103/3.

Edward Samuel
 for R. Col. B. I. Q.

A.G.R.

Rank

Name

ANGOVE, Samuel Edward ✓✓

Reg'l No.

141139 ✓✓

Unit

76th Bn. ✓✓

If in perm. Corps, }
What Unit? }

Married or Single

Single. ✓✓

Place and Date of Enlistment

Hamilton,
28th July, 1915. ✓✓

Place of Birth

Coburg, Ont. ✓✓

Name and Address, Next-of-Kin

Miss Laretta ~~Angove~~ ✓✓

P.O. Coburg, Ont. ✓✓

Relationship

Sister. ✓✓

Assigned Pay Monthly \$

Payable to

Q. H.V.

Relationship

Separation Allowance \$

Payable to

N E R B Serial No

Relationship

N/E. R.B. No.
File R.L.
Category <i>Ka</i>

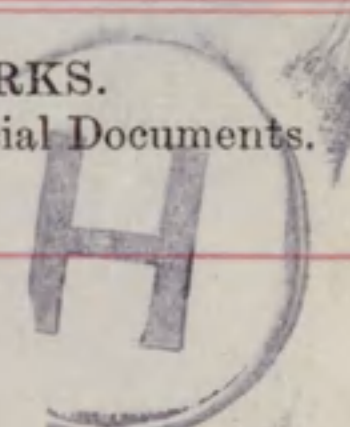


Discharge, Date and Place

Reason

Character

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.				
		<i>Arrived in England</i>		<i>4 MAY 1916</i>	
<i>11.7.16.</i>	<i>OC. 76th</i>	<i>Trans to 36th Bn.</i>	<i>W Sandling.</i>	<i>9.7.16</i>	<i>PT II 42</i>
<i>17.7.16</i>	<i>OC. 36th</i>	<i>Trans to 2nd</i>	<i>"</i>	<i>17.7.16</i>	<i>PT II 42</i>
<i>9.9.16</i>	<i>" 2nd</i>	<i>Killed in Action</i>	<i>France</i>	<i>3.9.16</i>	<i>PT II 42</i>
<i>13.9.16</i>	<i>" "</i>	<i>" " "</i>	<i>"</i>	<i>3.9.16</i>	<i>CLA/460</i>



Surname

Christian Name or Names

Reg. No.

Angove - S

E

141139

Rank

Unit

Co.

Troop

Batty.

Pte
Hospital

2 Batt

Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1)
Later Diagnosis (if changed)

(2)

(3)

Killed in Action 3. 9. 16

Additional Diagnosis: if more than one state present

DISPOSITION

Date

REMARKS

Bch 13. 9. 16 A460

A.M.D. 2 DEPT.

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

9

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

Name *Angove S. S.* Rank *Private* Reg. No. *141139*
 Unit *2nd Battalion* *25. A. 565.*
 Next of Kin *Canada*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
<i>3-9-16</i>	<i>D.C. 535-6</i>					
	<i>7-9-16</i>		<i>"Killed in Action"</i>		<i>A460</i>	<i>0626</i>
			<i>MA</i>			<i>13/9</i>

NAME *Angone Samuel Edward*REG'T'L. NO. *141139*RANK AND CORPS *Pte. 2nd. Bu. (Form. 76th. Bu.)*

CABLE

NATURE OF CASUALTY

No.

DATE

*Q. 626. 12-9-16**Killed in action Sept. 3rd. 1916**B2090a 9-9-16**" " " " " "**Lower France*

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

W460 Reported from the Base 3-9-16 Killed in action.

MARRIED

SINGLE

Yes.

WIDOWER

TRADE OR CALLING

Waiter.

RELIGION

Roman Catholic

DESCRIPTION.

APPARENT AGE

18

YEARS

—

MONTHS

HEIGHT

5

FEET

8

INCHES

CHEST MEASUREMENT

36

INCHES

EXPANSION

4

INCHES

COMPLEXION

Fair

EYES

Brown

HAIR

Brown.

DISTINGUISHING MARKS

1 Vacc. R. arm.

MEDICAL EXAMINATION.

PLACE

Hamilton, Ont.

DATE

July 28th. 1915.

SURNAME.

Angove (649-A-1762)

CARD NO.

✓

CHRISTIAN NAMES

Samuel Edward

FOLL

D

REGL. No.

141139.

RANK

Pte

UNIT

46th.

Batt.

FORMER CORPS

Nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Angove, Miss Lauretta

RELATIONSHIP TO SOLDIER

Sister

ADDRESS

Cobourg, Ont

COUNTRY OF BIRTH

Canada, Cobourg, Ont.

DATE

July 29th. 1897.

PLACE OF ATTESTATION

Hamilton, Ont.

DATE

July 28th. 1915.

Sailed from Halifax per S. S.

Empress of Britain 23-4-16

No. 741 139

RANK

Plt

NAME

Angove S

E

T. O. S.

UNIT

76th Battalion (13th Royal Regt)

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 July. 22	1915 July 31	✓		
Aug.		✓		
Sept.		✓		
Oct.		✓		
Nov.		✓		
Dec.		✓		
1916 Jan.		✓		
Feb.		✓		
Mar.		✓		
Apr.		✓		
			A.W. L. 5 days. C. B. 6. 10. 15	D.O. 82 of 6. 10. 15



NAME *Angove. E. S. 1st* REG. NO *141139* FILE NO *649. a. 1762*

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

Not elig. for 1914 10th Star

M

sent Bu

4015

Medals. Father. and Decorations

Mr Edward. Angove.

Cobourg Ont.

P. v. S. Father.

as above.

(Serial no. 760251.)

P 4166

AUG 27 1921

C of S.

his son above.

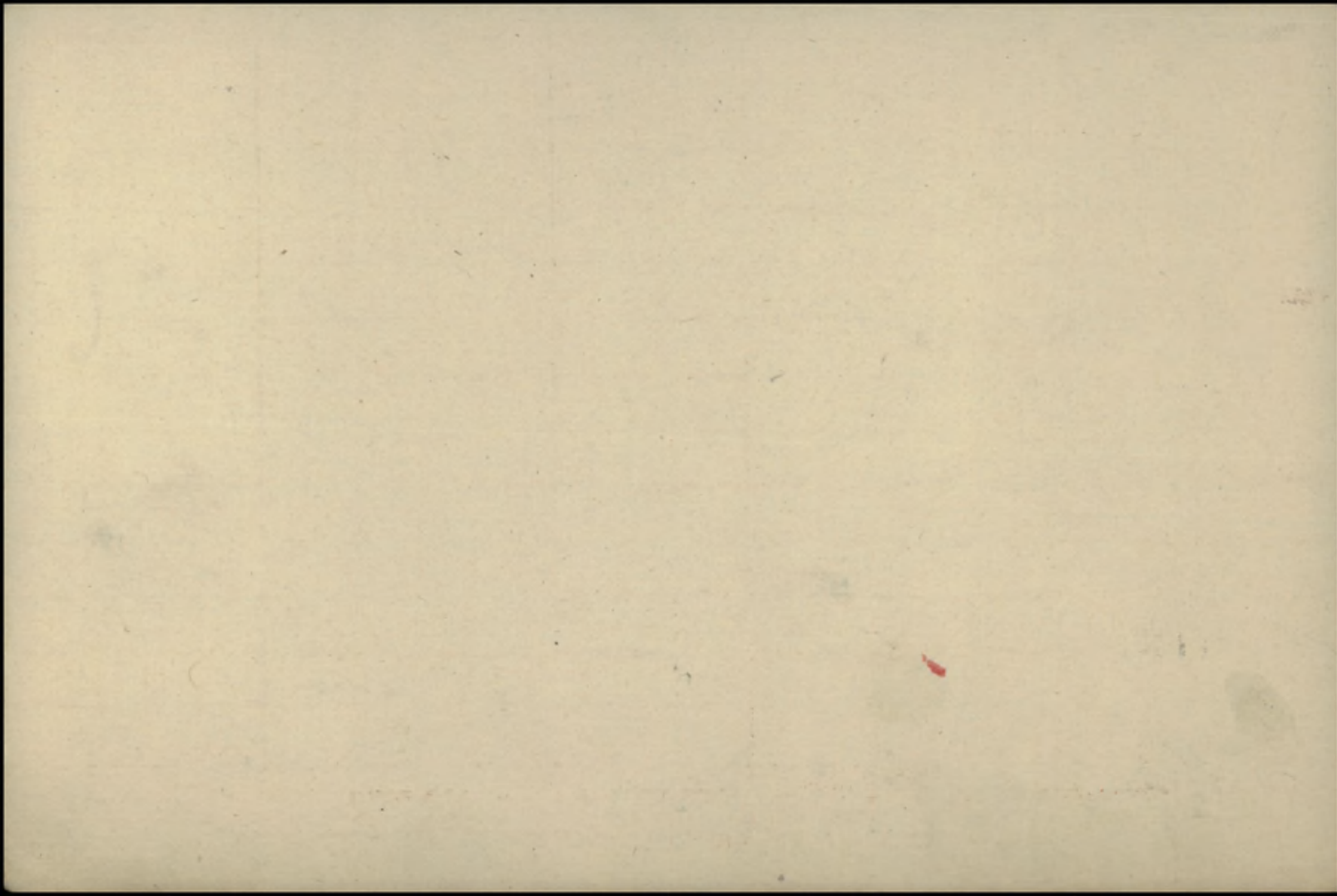
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74888

Scroll Dep. Reg. No.

Place Dep. Reg. No.

26/1/21



Card

Number 141139 Rank Plt

Surname ANGOVE

Christian Name Samuel Edward

Units 2nd Bn Can Div Theatre of War France

Date of Service 17-7-16

Remarks (L) Mr. Edward Angove,

Latest Address Cobourg, Ont

Roll No. B Page 2065

Port, ship, and date of arrival.....

Next of kin.....

Address on leave.....

Address on discharge.....

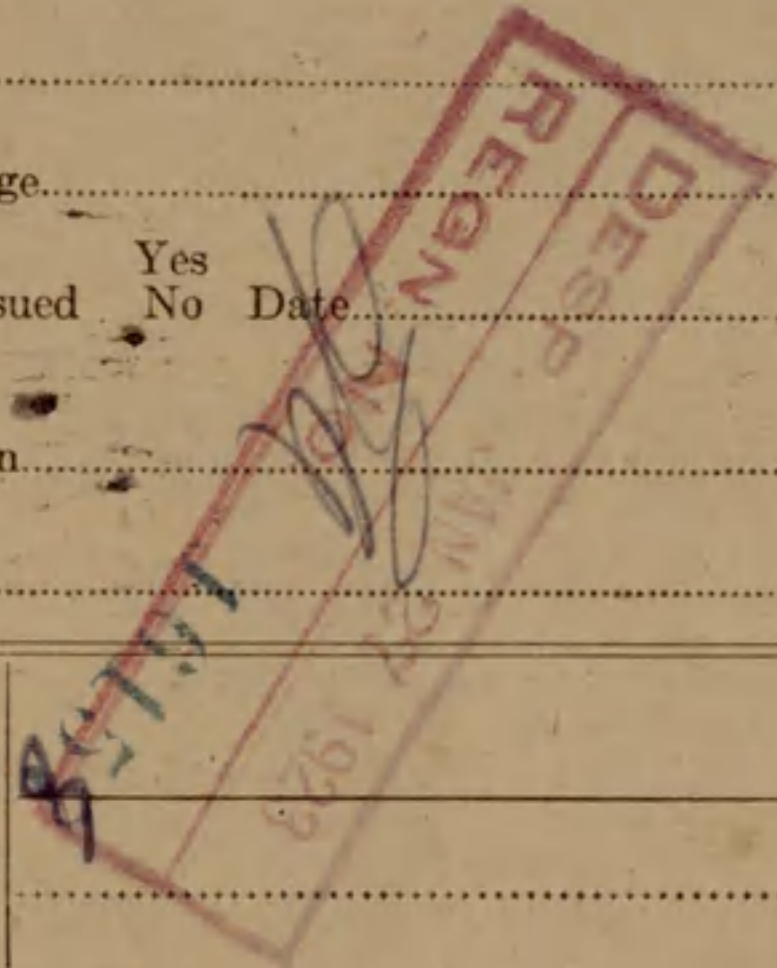
Transportation issued Yes No Date..... Character on discharge.....

Previous occupation..... Date and place of enlistment.....

Diagnosis..... Date of Medical Boards.....

Date.	Remarks
.....
.....
.....
.....
.....
.....

*—Name will be given in full; surname first.



141139 Angove Samuel Edward
76th Battalion

16-8

26/9/39

F 011

DISCHARGE DOCUMENTS

COALS

APR 30 ENT'D

Regtl. No. C40370, Rank Gunner

Handwritten: DAI 2

Name Bright, Harold, Royston, Bright
(Christian Names in full) (Surname)

Unit 8th Army Brigade C.A.
Regt. or Corps

Date of { Discharge*
Disembodiment*
Transfer to the Reserve* } 191.....
* Strike out whichever inapplicable

Handwritten:
OG 1.
SG 18

Stamp:
H-M-T NORTHLAND
SAILED LIVERP'L MCH-27 1919
RR'D HALIF'X. APL 5 1919

COVER

FOR

DISCHARGE DOCUMENTS.

NOTE.—In every case where A.F. Z.22 is included among the documents the letter Z is to be stamped in the space provided below.

