

# REGIMENTAL DOCUMENTS

NAME ANTILL. Wallace REGT. No. 123541 UNIT 40<sup>th</sup> Baltn H. Q. FILE No. \_\_\_\_\_

x 1156

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			<b>DEATH</b>
/ CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					CATEGORY
/ <del>TRAINING HISTORY SHEET (M.F.W. 113)</del> <i>Record sheet</i>					<i>Killed in Action</i>
/ FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					<i>18-11-16</i>
/ REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
/ COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)		H			<b>DISCHARGE</b>
2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					CATEGORY
DENTAL HISTORY SHEET (M.F.B. 465)					
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
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)					<b>DESERTION</b>
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)					
4 CARDS					
4/25 PAY-SHEETS					
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					22-3
					32-4
					<u>1</u>

191

ORIGINAL

ORIGINAL

ATTESTATION PAPER.

No. ~~123541~~

Folio. ~~184~~

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

123541 a

QUESTIONS TO BE PUT BEFORE ATTESTATION. (ANSWERS.)

1. What is your name?..... Wallace Antill
2. In what Town, Township or Parish, and in what Country were you born?..... Leicester, England.
3. What is the name of your next-of kin?..... Wife Mrs. Alice Antill--
4. What is the address of your next-of-kin?..... Rymer, Ontario Canada
5. What is the date of your birth?..... Nov. 28th, 1891.
6. What is your Trade or Calling?..... Farmer.
7. Are you married?..... Yes
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?..... 2 yrs 4th Leicester Regt.  
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

WA

Wallace Antill (Signature of Man.)  
J. G. Woods (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Wallace Antill, 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 Sept 18<sup>th</sup> 1915 Wallace Antill (Signature of Recruit)  
J. G. Woods (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Wallace Antill, 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 Sept 18<sup>th</sup> 1915 Wallace Antill (Signature of Recruit)  
J. G. Woods (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 Rymer this 18<sup>th</sup> day of Sept 1915. J. G. Woods (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit. J. G. Woods (Approving Officer)

DESCRIPTION OF Wallace Antill ON ENLISTMENT.

Apparent Age 24 years --- 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 1/2 ins.

Chest measurement { Girth when fully expanded 36 ins.  
 Range of expansion 2 ins.

Complexion Fair

Eyes Hazel

Hair Brown

Religious denominations. { Church of England Yes  
 Presbyterian.....  
~~Wesleyan~~ Methodist.....  
 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\* fit for the Canadian Over-Seas Expeditionary Force.

Date Sept 18<sup>th</sup> 1915

Place Aylmer [Signature]  
 Medical Officer.

\*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.

Wallace Antill 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] Lt. Col. (Signature of Officer)  
 Date Sept 22nd 1915 Briff. comd 70th Overseas Bn. C. E. F.

J.P.<sup>W</sup>

Rank *Pte* Name **ANTILL, Wallace** Reg'l No. **123541.**

Unit **91st. Bn.** If in perm. Corps, }  
What Unit? }

Place and Date of Enlistment **Aylmer. 18th Sept. 1915.** Place of Birth **Leicester. England.**

Name and Address, Next-of-Kin **Mrs. Alice Antill.** Relationship **Wife.**

**Aylmer. Ontario. Canada.**

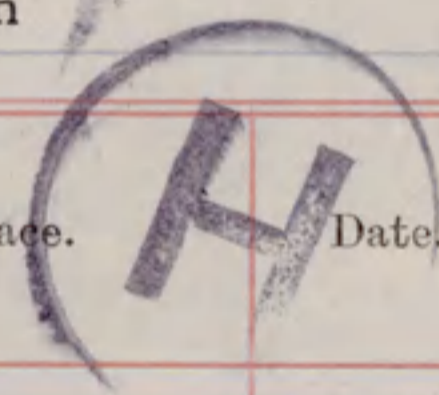
Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to **Rh25 A 859. ver 23.1.17.** Relationship

Discharge, Date and Place Reason Character **VERB No. 16**

H. W. & V., Ltd.—7165-16.

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>e.</i>					
18.7.16	91 <sup>st</sup>	Arrived in England 1 <sup>st</sup> fd to 12 <sup>th</sup> Bn	W Sandling	6 - JUL 1916 15.7.16	S.S. Olympus Pt II D.O.#174
19.7.16	0612 Bn	Taken on strength.	Shelpe	15.7.16	" 201
20.8.16	12 <sup>th</sup> Bn	S.D.S. to 45 <sup>th</sup> Bn overseas	W Sandling	20.8.16	+229
21.8.16	45 <sup>th</sup> Bn	T.O.S. from 12 <sup>th</sup> Res. Bn.	In the Field	21.8.16	193 Auth % CBSD from Fall 21/8/16
2.12.16	75 <sup>th</sup>	Killed in Action	Field	18.11.16	Pt II D.O. 272
6.12.16	75 <sup>th</sup>	Killed in Action	"	18.11.16	Ch A 80



**A.F.B. 103 CHECKED**  
24 AUG. 1916



WAR SERVICE GRATUITY

TO  
DEPENDENTS OF DECEASED SOLDIERS

Register No. *DA 102*

A.P. File No. *429 W. 18*

Regt'l No. *12 3541* Name *Wallice* *Antill*  
(Christian Name) (Surname)

Unit *91 Bu.* Rank *Pte* Date of enlistment.....

Date of casualty *Nov 18- 1916* B.P.C. File No. *8677*

Was service performed overseas? *yes*

DEPENDENT

Name *Mrs Arabella A. Antill* Relationship *Widow*

Address *Aylmer West*  
*Cent.*

Amount of Special Pension Bonus \$ *\$64* Abstracted by *J. McEadden*

Eligible for Gratuity ..... \$ *180.00*

Less amount of Special Pension Bonus paid..... \$ *64.00*

Less Debit Balance of S. A. or A.P..... \$ .....

Total deductions \$ *64.00*

Balance due \$ *116.00*

Cheque No. *9.1890983* Date issued *14-7-20*

Clerk *J. North*

REMARKS :  
.....  
.....  
.....  
.....

Audited by  
*Geoff Howes*  
Date *13-7-20*

M.F.W. 2652  
25M-6-20.  
H.Q. 1772-39-1473

# POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname

Christian Name

Regimental Number

Rank

Address (in full)

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Rates:—Regimental pay \$

per diem; Field Allowance \$

per diem.

Separation Allowance \$

per month.

L.L. 53961--M. & D. 9721

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments to be Reccovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

M. F. W. 127  
306M-1-19  
1772-39-1140

Remarks:



CERTIFIED CORRECT.

26 AUG. 1916

CAN. RECORDS, LONDON.

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

M. F. W. 54.  
150M. 10-15.  
H.Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps 91st Os. Bn. C.E.F. <sup>10th</sup>

Regimental No. 125541 Rank Private Name Antill, Wallace  
C. E. F.

Enlisted (a) 18-9-15. Terms of Service (a) Duration of war. Service reckons from (a) 18-9-15.

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) Farmer

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				
15-7-16	Transferred from 91st Bn. To 12th Res. Bn.	Embarked Disembarked. <i>Transferred from 70th to 91st Bn</i> <i>Taken on strength 12th Battalion.</i>	Halifax, N.S. Liverpool, St. Thomas	29-6-16. 5-7-16. 6-11-15	H. M. T. 2810. S. S. Olympic. Order No 12 (1915) part 2.
	Trans. to 75th Battalion 4th Div		W. Sandling W. Sandling	15-7-16. 19-7-16.	Order, 174, Part 2. Part 2, B.O. <i>[Signature]</i>
21/8/16	O.C.B.D.	Disembarked - France	France	21/8/16	Nominal Roll dt 21/8/16
21/8/16	O.C. 75th Bn.	Taken on strength of 75th Bn.	Field	21/8/16	Part II Order No 193 dt 31/8/16
5/9/16	O.C.B.D.	Left to join Unit	Field	5/9/16	Nominal Roll.
9-9-16	O.C. 75th	Joined Unit	Field	7-9-16	A.M. 213; D.C.S. No 15 dt 14-9-16.

*[Signature]*  
Captain & Adjutant

(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.



MILITIA AND DEFENCE  
 ASSIGNED PAY  
 OVERSEAS CONTINGENTS

121 M F W 12.  
 50m.—4-16.  
 H. Q. 1772-39-819.

*Em*

To Whom *Mrs Alice Antill*  
 Address *Aylmer Ont*

*wife*  
 By Whom Assigned *Antill W*  
 Regtl. No. *123541*  
 Rank *Pte*  
 Corps *A Coy, 91" Batt*

Rate *20,*

**JUL - 1 1916**

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<p><i>3 M. Dec. 9/16 confirming C. L.</i>  <i>Stop Jan. 1/17</i>  <i>J.N. 10/17</i>  <i>Killed in action 18/1/16. C.R. (5) 6/12/16. B.M.A.</i>  <div style="border: 1px solid black; padding: 5px; display: inline-block; margin: 10px 0;"> <i>Casualties</i> </div>  <i>J.N. 13-12-16</i>  <div style="border: 1px solid black; border-radius: 50%; padding: 10px; text-align: center; margin: 10px 0;">                 PENSION                  AP. CLOSED.....                  OVER-PAYT.....                  RECOVERED.....                  BY.....                  GRANTED             </div> </p>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

02 28 28

28 28 28

28

MILITIA AND DEFENCE  
**ASSIGNED PAY**

1222  
 M. F. W. 12a.  
 56th. - 4-16.  
 1772-39-819.

Sheet No. 2. *Mrs Alice Antill*

OVERSEAS CONTINGENTS

Name of Soldier. *Antill W*

*wife*  
 PAYMENTS.

L. L. Job 310.-Req. 6574.

*123541 Pte. Acy. 91" Batt*

Month.	Year.	Cheque No.	Amt.
April	1916		
May			
June			
July		<i>211157</i>	<i>20</i>
Aug.		<i>212225</i>	<i>20</i>
Sept.		<i>15001</i>	<i>20</i>
Oct.		<i>19490</i>	<i>20</i>
Nov.		<i>24288</i>	<i>20</i>
Dec.		<i>32993</i>	<i>20</i>
Jan.	1917		<i>120</i>
Feb.			
March			
April			
May			
June			
July			
Aug.			
Sept.			
Oct.			
Nov.			
Dec.			
Jan.	1918		
Feb.			
March			
April			
May			
June			
July			

*20,*

Remarks.

*JUL 7 1916*

*Casualties*

*Out closed. Cas.*

*Pension granted Nov. 19/16 a.k*

*Total \$120 -  
 24/8/17*

*gfr*

*gfr*

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

**PAYMENTS.**

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1913			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

15-9-15

MILITIA AND DEFENCE

157

SEPARATION ALLOWANCE

Name *Alice Antill*  
Address *Aylmer Ont*

Name of Soldier *Antill Wallace*

Regtl. No.

Rank *Plt*

Corps *91st Batta*

Relation to Soldier } *Wife*  
wife, child or mother }

To what Corps belonging }  
when called out }

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916	<i>H 20072</i>	<i>70 -</i>	<i>70</i>
Feb.		<i>F 24465</i>	<i>20</i>	<i>20</i>
March		<i>F 27451</i>	<i>20</i>	<i>20</i>
		<i>F 34344</i>	<i>20</i>	<i>20 Issued on</i>

ACCOUNT CLOSED  
DATE.....PER.....  
*W*

0 . 444  
444

210020

4444



Faint, illegible red markings or bleed-through from the reverse side of the page.



# SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2. Alice Antill

(Wife)

Name of Soldier Antill Wallace

PAYMENTS.

L. L. Job 89002.-Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	H 242	20 -	20
May		J 4488	20	20
June		E 3620	20	20
July		M 10138	20	20
Aug.		A 12160	20	20
Sept.		E 14676	20	20
Oct.		J 18119	20	20
Nov.		F 21122	20	20
Dec.		7 24596	20	20
Jan.	1917	E 28213	20	20
Feb.				20
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

*Acc closed pension granted 19/16.*

**ACCOUNT CLOSED**

*E.O.E. 24/17.*

DATE: ..... PER: W

*\$48.00 Recovered as per Pensions list for Feb 1917 CDA 24-3-17*

MILITIA AND DEFENCE  
**SEPARATION ALLOWANCE**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

**PAYMENTS.**

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

MILITIA AND DEFENCE  
ASSIGNED PAY  
OVERSEAS CONTINGENTS

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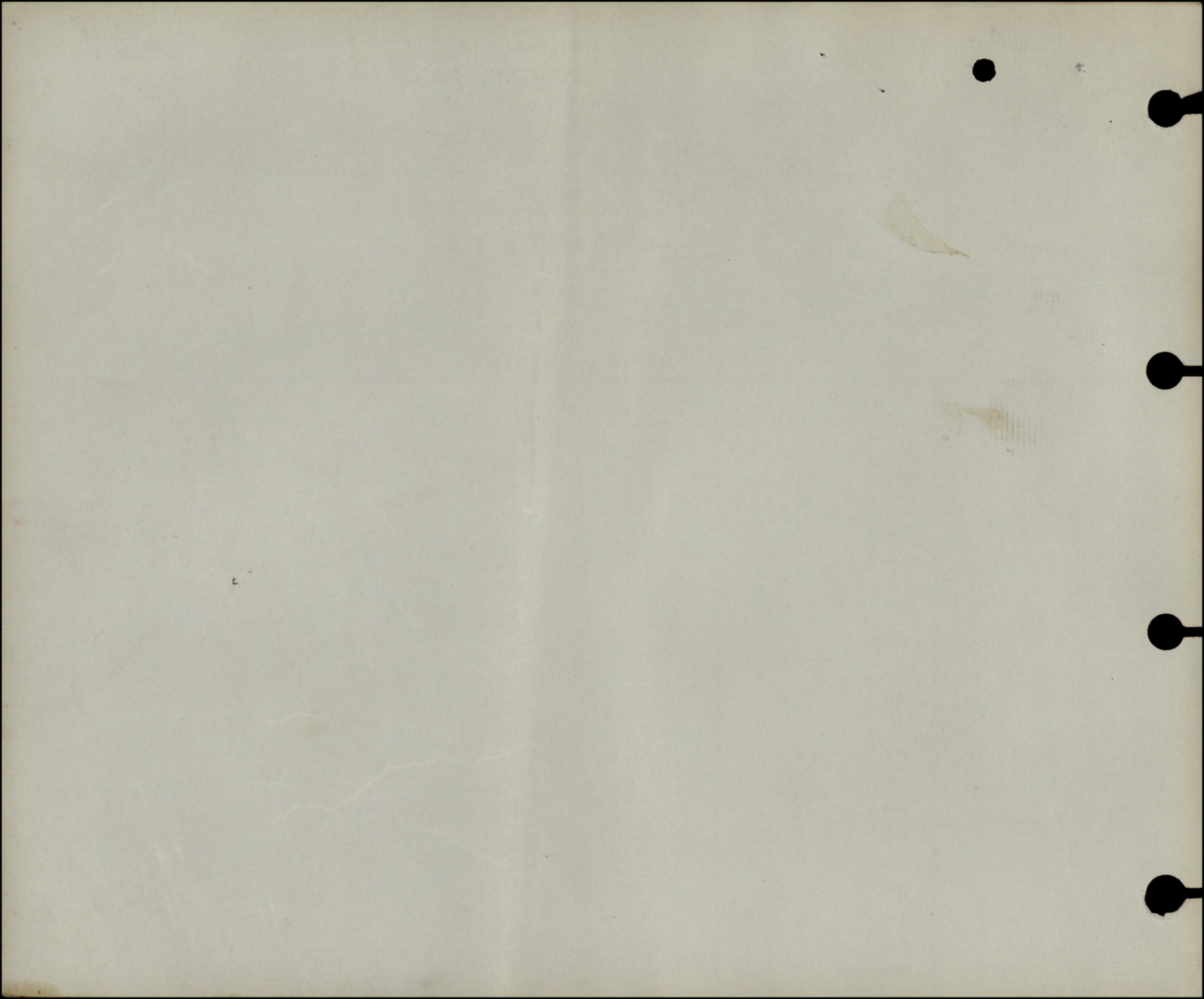
To Whom *Dr. A. S. Antill*  
Address *97 St. Michaels Ave  
Leicester Eng.*

By Whom Assigned *Antill Dr.*  
Regtl. No.  
Rank *Gr.*  
Corps *Base Co 218de C.A.*

Rate *10<sup>00</sup> per m*

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>Duplicate sent to England for payments</i> <b>ENGLISH</b>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



**ORIGINAL**  
**MEDICAL HISTORY SHEET.**

189 ~~1143~~  
173546

Surname Antill Christian Name Hallace

Examined on 18<sup>th</sup> day of Sept 1915  
at Army  
Birthplace { City or Town Leicester  
County England

Approved by J.D. Beck  
C.W. Snelgrove  
Rank Capt. J. Johnston

Apparent age 24  
Trade or occupation Farmer  
Height 5 Feet 8 1/2 Inches.  
Weight 135 Lbs.  
Chest measurement { Minimum 34 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.

Vaccination Marks { Arm Right Left 4  
Number 10 year  
When Vaccinated last 10 year  
(a) Marks indicating congenital peculiarities or previous disease none

Date	Result	VACCINATIONS.
<u>15/4/16</u>		<u>J.W. Pluster</u> M.O.
		M.O.
		M.O.

(b) Slight defects but not sufficient to cause rejection none

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>20/10/15</u>	<u>500M</u>	<u>J. Stephens</u> M.O.
<u>20/10/15</u>	<u>1000M</u>	<u>J. Stephens</u> M.O.
		M.O.

Enlisted on 18 day of September 1915 at St. Thomas.

	CORPS.	REG'TL NUMBER.	MARKS.	DATE.
Joined on enlistment	<u>70th Bn</u>	<u>123541</u>	<u>Good</u>	<u>Sept 15/15</u>
Transferred to..	<u>91st Bn</u> <u>75th Bn</u>	<u>189145</u>	<u>Good</u>	<u>Nov 6/15</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.



Number *123541* Rank *Pvt*

Surname *ANTILL*

Christian Name *Stallace*

Units *75th Bn Cavalry* Theatre of War *France*

Date of Service *20-8-16*

Remarks *(w) Mrs Alice Antill*

Latest Address *Cyprus West*

*Out*

Roll No. *B Page 205-05*

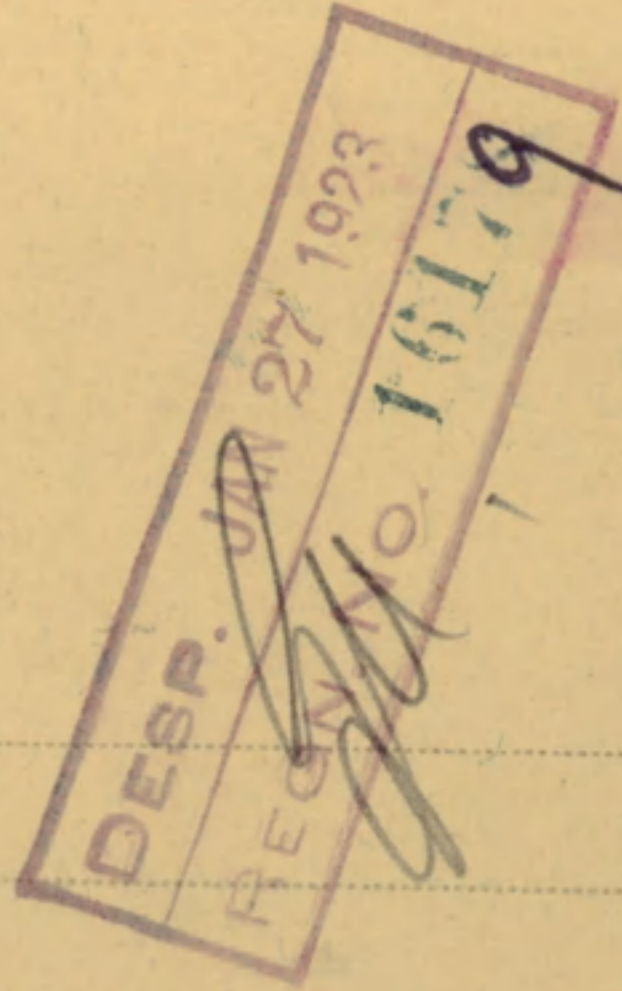
200m.-6-21.M.

Registration name

Address

Number

Bank





No. 189145 RANK *pt.*

NAME *Antill, W*

125541  
apr pay list

UNIT *91<sup>st</sup> Battalion, b, c, f*

*Trans from 70<sup>th</sup> Bn b, c, f  
6-11-15, (D.O 12 of 7-11-15)*

M. D. /

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915 Nov 1</i>	<i>1915- Nov 30</i>	<i>✓</i>	<i>Prom to a/Capt. 25-1-16</i>	<i>D.O. 20 of 25-1-16. UNIT SAILED JUN 28 1918</i>
<i>Dec.</i>		<i>✓</i>		
<i>Jan.</i>		<i>✓</i>		
<i>Feb.</i>		<i>✓</i>		
<i>Mar.</i>		<i>✓</i>		
<i>Apr.</i>		<i>✓</i>		
<i>May.</i>		<i>✓</i>	<i>Trans to 12<sup>th</sup> Res Bn 15-7-16 (D) 174 of 18-7-16.</i>	
<i>July 1.</i>	<i>July 15</i>	<i>✓</i>		



No. 123541 RANK *Plt.*

NAME *Artill Wallace*

T. O. S. 18-9-15-

UNIT *70<sup>th</sup> Battalion*

DO 22 of 22-9-15-

M. D. /

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915 Sep. 18</i>	<i>1915 Sep. 30</i>	<i>✓</i>		
<i>Nov. Oct.</i>	<i>no y/c.</i>	<i>✓ N.</i>	<i>Transfd to 91<sup>st</sup> O. S. Bn.</i>	<i>DO 68 of 6-11-15</i>



# EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

*out*

Surname *Antill* Christian Name or Names *W.* Reg. No. *123541*  
 Rank *Pl.* Unit *75 BATT.* Co. Troop Batty.  
 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

*Killed in action*  
*Rps Lane 18-11-16* Date

DISPOSITION

*e2*  
*6-11-16* *ago*

REMARKS

A.M.D. 2 DEPT.

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

*11*

W 6 2827  
M 6 2859

hlep 13 <sup>3</sup>/<sub>20</sub>

ANTILL, Pte. Wallace, #123541, 75th Bn.

649-A-2779

*Not elig. for 1914-15 Star*

MEDALS & DECORATIONS. (Widow)

Mrs. Alice Antill,  
Aylmer West,  
Ont.

PLACQUES & SCROLLS. (Widow)

Mrs. Alice Antill,  
Address as above.

*Serial No 784533*

CROSSES OF SACRIFICE. (Widow)

Mrs. Alice Antill,  
Address as above.

FEB 24 1921

Scroll Desp. \_\_\_\_\_ Regn. No. *2-23060*

MAR 10 1922

Plaque Desp. \_\_\_\_\_ Regn. No. (Mother) *p32514*

Mrs. Ada Antill,  
97 St. Michael's Ave.  
Melton Rd.,  
Leicester, Eng.

*Dep 15-3/20 C 2859*



MARRIED

*yes*

SINGLE

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE

(649-a-2779)

CARD NO.

✓

S NAME. *Antill,*

CHRISTIAN NAMES *Wallace*

REGL. No. *123541.*

RANK *Pte*

FOLL.

*D*

UNIT ~~*70<sup>th</sup>*~~ *91<sup>st</sup>*

*Bar*

FORMER CORPS *H<sup>th</sup> Leicester Regt.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL *Antill, Mrs Alice.*

RELATIONSHIP TO SOLDIER *Wife*

ADDRESS *Aylmer, Ont.*

COUNTRY OF BIRTH *England, Leicester*

DATE

PLACE OF ATTESTATION *Aylmer, Ont.*

DATE

*Sep. 18<sup>th</sup> 1915.*

*Sailed from Halifax per S.S.*

*Olympic 28-6-16  $\frac{466}{2}$*

LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

A 80

Rep. from base

Killed in action 8-11-46

NAME Antill Wallace

RANK AND CORPS Pte. 75th Bu. Form. 20th Bu.

## CABLE

## NATURE OF CASUALTY

NO.

DATE

NO.	DATE	NATURE OF CASUALTY
05907	5-12-16	Killed in action Nov. 18th 1916 ✓
B20909	Rouen 2-12-16	" " France 18-11-16 { noted 3-3-17 }





P. 599. MARRIED OR SINGLE *Married.*  
 PLACE OF BIRTH *Leicester, Eng.*  
 NAME AND ADDRESS OF NEXT OF KIN *Mrs. Alice Antill*  
*Aylmer, Ont. Can.*  
 RELATIONSHIP OF NEXT OF KIN *Wife*  
 NAME AND ADDRESS OF NEXT OF KIN  
 RELATIONSHIP OF NEXT OF KIN  
 SEPARATION ALLOWANCE MONTHLY \$ *20.00* EFFECTIVE (DATE) *10/9/18*  
 PAYABLE TO *Mrs Alice Antill,*  
*Aylmer, Ont.*  
 RELATIONSHIP OF DEPENDANT *Wife*

CASUALTIES, PROMOTIONS, &c.		
PARTICULARS	EFFECTIVE DATE	AUTHORITY
<i>Killed in action</i>	<i>18/11/16</i>	<i>Ch.O. 80-6/12/16</i>

REG'L. No. *123541* RANK *Private* NAME *Antill Wallace*  
 IF IN PERM. CORPS } UNIT *41st. Bn* TRANSFERRED TO *12th Res.* DATE *12/9/16* AUTHORITY *174-1*  
 WHAT UNIT } TRANSFERRED TO *45th Bn* DATE *1/9/16* AUTHORITY *B.O. 229 20*  
 PERMANENT FORCE ALLOWANCES } TRANSFERRED TO *N.E. Br* DATE *11/17/16* AUTHORITY *Ch.O. 80-6/12/16*  
 PLACE OF ATTESTATION *Aylmer, Ont.* TRANSFERRED TO \_\_\_\_\_ DATE \_\_\_\_\_ AUTHORITY \_\_\_\_\_  
 DATE OF ATTESTATION *18th Sept. 1915* TRANSFERRED TO \_\_\_\_\_ DATE \_\_\_\_\_ AUTHORITY \_\_\_\_\_  
 ASSIGNED PAY MONTHLY \$ *20.00* DATE EFFECTIVE *1st July 1916*  
 PAYABLE TO *alice*  
~~Mrs Alice Antill, Aylmer, Ont.~~  
 ASSIGNED PAY MONTHLY \$ \_\_\_\_\_ DATE EFFECTIVE \_\_\_\_\_  
 PAYABLE TO \_\_\_\_\_  
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *8/12/16* EFFECTIVE *1/1/17* REASON *Killed in action*  
 DISCHARGE DATE AND PLACE \_\_\_\_\_ REASON AND AUTHORITY *Ch.O. 80-6/12/16*  
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) *19-11-16* REASON *Entered on N.E. Card Index*  
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE) \_\_\_\_\_ REASON *Checked by H. Sillitoe*

ADMISSIONS TO HOSPITAL, &c.			
DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

PAY BOOK CHECKED.  
 Date *19-11-16*  
 By *H.B.*  
 N.E. BRANCH

REGIMENTAL CLERK  
 JAN 1917  
 CANADIAN CONTINGENT  
 PB 10738  
 RELATIONSHIP *Wife*

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS		
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE				AMOUNT		1		2		3					4					CREDIT	DEBIT
			\$	c.						\$	c.	NO.	DATE	NO.	DATE	NO.	DATE				NO.	DATE					
1916																											
<i>July 15</i>	<i>15</i>	<i>10</i>	<i>15</i>	<i>00</i>	<i>15</i>	<i>10</i>	<i>150</i>		<i>16 50</i>	<i>7 15 1/2</i>											<i>48 00</i>				<i>Transferred to 12th Res. Bn</i>		
<i>10/8-3/9</i>	<i>47</i>		<i>47</i>		<i>47</i>		<i>470</i>		<i>51 40</i>	<i>1466 31/4</i>	<i>1875 15/8</i>								<i>243 ✓</i>		<i>20 00</i>	<i>2243</i>	<i>207</i>		<i>15/7/16 O.O. 174-1</i>		
<i>Sept 30</i>			<i>30</i>		<i>30</i>		<i>30</i>		<i>33</i>			<i>5828 7/8</i>							<i>436 ✓</i>	<i>20</i>	<i>2436</i>	<i>2781</i>					
<i>Oct 31</i>			<i>31</i>		<i>31</i>		<i>310</i>		<i>34 10</i>	<i>48 28/4</i>	<i>125 30/191 39 17/4</i>								<i>262 ✓</i>	<i>261 ✓</i>	<i>20</i>	<i>2784</i>	<i>34 07</i>				
<i>Nov 30</i>			<i>30</i>		<i>30</i>		<i>30</i>		<i>30</i>	<i>258 3/4</i>	<i>30 13/11</i>								<i>262 ✓</i>	<i>261 ✓</i>	<i>20</i>	<i>2523</i>	<i>4184</i>				
<i>Dec</i>									<i>176 30</i>											<i>20</i>	<i>1320</i>	<i>3320</i>	<i>864</i>		<i>overpaid 12 days Nov</i>		
<i>Aug/17</i>																					<i>20</i>	<i>3320</i>	<i>864</i>		<i>Killed in action 18-11-16 O.O. 80-6-12-16</i>		
																							<i>864</i>			<i>Trans to N.E. Br 19 APR 16 11/17/16</i>	
																							<i>864</i>			<i>Dis to Old for acc'd 23/7/17 V. 34</i>	

Statement of  
 JUN 15 1917  
 Account rendered

*Can. P. 120 00 In agreement with Ottawa Slip HQ 593-1-12 2/12/16*

