

REGIMENTAL DOCUMENTS

X2071

NAME ARCHIBALD WILLIAM

REGT. NO. 754004

UNIT \_\_\_\_\_

H. Q. FILE NO. \_\_\_\_\_

**S**

**S**

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DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505  
REFERENCE

NON-EFFECTIVE BY

**DEATH**

Category

**DISCHARGE**

Category

**DESERTION**

**H**

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TRAINING HISTORY SHEET (M.F.W. 113) *Disrupt*

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REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120) *1*

COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121) *1*

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*19149*  
*19357*  
*Original Will*  
*copy*  
*pay sheets*

*1-3*  
*25-3*  
*27-3*  
*3*

11/11/11



**ATTESTATION PAPER.**  
**119th OVERSEAS BATTALION**  
**CANADIAN OVER-SEAS EXPEDITIONARY FORCE.**

No. *154004*  
 Folio.

**QUESTIONS TO BE PUT BEFORE ATTESTATION.**  
 (ANSWERS.)

1. What is your surname?..... Archibald
- 1a. What are your Christian names?..... William
- 1b. What is your present address?..... 79 Pim St. Sault Ste Marie, Ont.
2. In what Town, Township or Parish, and in what Country were you born?..... Marksville, Ont.
3. What is the name of your next-of-kin?..... Wallace Archibald
4. What is the address of your next-of-kin?..... 79 Pim St. Sault Ste Marie, Ont.
- 4a. What is the relationship of your next-of-kin?..... Father
5. What is the date of your birth?..... July 1st 1895
6. What is your Trade or Calling?..... Fireman
7. Are you married?..... No
8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes
9. Do you now belong to the Active Militia?..... No
10. Have you ever served in any Military Force?..... ~~Yes~~ 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 } Yes  
 CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

**DECLARATION TO BE MADE BY MAN ON ATTESTATION.**

I William Archibald do solemnly declare that the above are answers made by me to the above questions and that they 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 17/1 1916. Willie Archibald (Signature of Recruit)  
R. M. Math (Signature of Witness)

**OATH TO BE TAKEN BY MAN ON ATTESTATION.**

I William Archibald 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 17/1 1916. Willie Archibald (Signature of Recruit)  
R. M. Math (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 Sault Ste Marie this 17th day of February 1916  
J. S. Mackay (Signature of Justice)

# Description of William Archibald on Enlistment.

Apparent Age 19 years 6 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 ..... 35 1/2 ins.  
 Range of expansion ..... 2 1/2 ins.

Complexion ..... Fair

Eyes ..... Blue

Hair ..... Brown

Religious denominations. { Church of England ..... No  
 Presbyterian ..... X  
 Methodist ..... Yes  
 Baptist or Congregationalist ..... Yes  
 Roman Catholic ..... No  
 Jewish ..... Yes  
 Other denominations ..... Yes  
(Denomination to be stated.)

Nil.

## 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 January 17th 1916

James Andrew Lean

Place St. Catharines, Ont.

Capt

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.

William Archibald

..... 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.

W. Stevenson (Signature of Officer)  
 O.C. 119th O.S. BN. C.E.F.

Date March 21 1916

W. Rowland Colonel.  
 O.C. 119th O.S. Battalion, C.E.F.

28/6/16

ORIGINAL

ORIGINAL  
754004

119th OVERSEAS BATTALION  
MEDICAL HISTORY SHEET

Surname Archibald Christian Name William

Examined { on 17th day of January 1916  
at Sault Ste Marie, Ont.  
Birthplace { City or Town Marksville? Ont  
County \_\_\_\_\_  
Approved by James R. Lean  
Rank Capt M.O.

Apparent age 18  
Trade or occupation Fireman  
Height 5 Feet 8 3/4 Inches. M.O.  
Weight 144 Lbs. M.O.  
Chest measurement { Minimum 33 inches. M.O.  
Maximum expansion 35 1/2 inches. M.O.  
Physical development Good M.O.  
Small-Pox Marks None M.O.

Vaccination Marks { Arm Right Left  
Number None  
When Vaccinated last Never  
(a) Marks indicating congenital peculiarities or previous disease \_\_\_\_\_ M.O.

(b) Slight defects but not sufficient to cause rejection  
Has a slight B. Scycisis in face  
which he is to have cleaned up  
before enlisting  
Date Result ANTI-TYPHOID INOCULATIONS, ETC.  
Mar 7/16 ✓ James R. Lean M.O.  
Nov 27/16 ✓ James R. Lean M.O.  
28/10/16 ✓ James R. Lean M.O.

Enlisted on 17th day of January 1916 at Sault Ste Marie, Ont.

	CORPS.	REG'L NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>119th. O.S. Bn.</u>	<u>754004</u>		<u>17/1/16</u>
Transferred to	<u>73rd A. Bn. C.A.F.</u>			<u>NOV 14 1916</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.

Surname Archibald.

Christian Name William

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 completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
Coumaught	Ashot	11	9	16	4	10	16	Gonorrhoea	24	Ingulis with Pot <sup>Permanent</sup> <del>Permanent</del> Duplicate Medical History sheet posted to here. <i>[Signature]</i>	Innes Smith <i>[Signature]</i>

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

M. F. W. 54. (A. F. B. 103.)

# Casualty Form—Active Service.

250M.—1-16.  
H. Q. 1772-39-920. *W.B.*

Unit, Regiment or Corps **119th OVERSEAS BATTALION**

Regimental No *754004* Rank *Pte.* Name *Archibald William*  
C. E. F.

Enlisted (a) *17/1/16* Terms of Service (a) *Duration of War* Service reckons from (a) *17/1/16*

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) \_\_\_\_\_

**CERTIFIED CORRECT.**  
**22 NOV. 1916**  
**CAN. RECORDS, LONDON.**

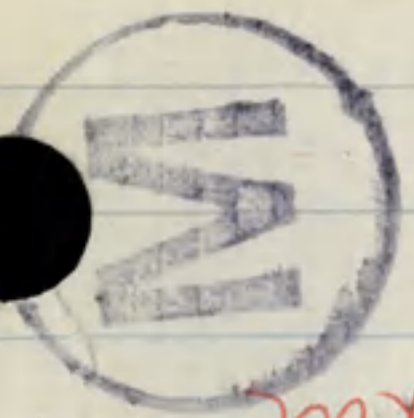
Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		<i>Embarked Canada</i>	<i>Halifax</i>	<i>8/8/16</i>	
		<i>Disembarked England</i>	<i>Liverpool</i>	<i>19/8/16</i>	
		<i>Proceeded for service with 73rd Bn. C.E.F.</i>	<i>overseas</i>	<i>14/11/16</i>	<p><b>B.O. No 225. Part II</b></p> <p><i>W. J. Anderson</i> LT. COL. COMMANDING 119th CAN. INF. BATTALION, C.E.F.</p>
<i>15/4</i>	<i>Can. Base Depot</i>	<i>Arrived in France for 73rd. Can. Bn</i>	<b>HAVRE</b>	<i>15/4</i>	<i>MR, Pt II Orders 25, dt-18/4</i>
<i>19/4</i>		<i>Left for Unit</i>	<i>Field</i>	<i>19/4</i>	<i>MR.</i>
<i>25/4</i>	<i>73rd Bn.</i>	<i>Joined Unit</i>	<i>Field</i>	<i>22/4</i>	<i>B 213, Des 56, dt-6/12</i>
<i>13-4-17</i>		<i>Killed in Action</i>	<i>Field</i>	<i>9-4-17</i>	<i>Letter K.J. 16-2064, Des 11 v Pt II Orders 41, dt-17/17</i>

*J. M. Anderson*  
Lieutenant  
for Major, D.A.C.

(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. I.P.T.O.







JM

Rank

Name

~~XX~~ ARCHIBALD, William.

Reg'l No. 754004

Unit 119th Bn.

If in perm. Corps, }  
What Unit? }

Married or Single Single.

Place and Date of Enlistment

Sault Ste Marie.  
17th Jan 1916.

Place of Birth Marksville, Ont.

Name and Address, Next-of-Kin Wallace Archibald.

79 Pim St, Sault Ste Marie, Ont. Canada.

Relationship Father.

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

*P.L. 25. A 1054*

Discharge, Date and Place

Reason

Character

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.				
	Arrived in England		S. S. Metagama	19.8.16	
11-9-16	<i>OC</i> 119 <sup>th</sup> Bn	Admitted to Hospital	Bramshott.	11-9-16	<i>D. to R. #6</i> <i>Pr# D.O. #169.</i>
5-10-16	<i>OC</i> 119 <sup>th</sup> Bn	Discharged from Hospital	Bramshott	4-10-16	<i>D. to R. #19.</i> <i>Pr# D.O. #190.</i>
15-11-16	<i>OC</i> 119 <sup>th</sup> Bn	Transferred to 73 <sup>rd</sup> Bn	Bramshott	14-11-16	<i>Pr# D.O. #225.</i>
18-11-16	Ob 93 <sup>rd</sup> Bn	Taken on strength.	Field	15-11-16	<i>Pr# D.O. #257</i>
17-4-17	73 <sup>rd</sup> Bn	Killed in Action	Field	9-4-17	<i>Pr# D.O. #41</i>
23-4-17	-	-	-	9-4-17	<i>68A 193</i>

*M.X.*  
*29/6/21 M.J.*

**A.F.B. 103 CHECKED**  
**20 NOV. 1916**

V.D.G.

Date.	Report. 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.

H

10,432 ✓

FORM OF WILL.

no card

I, William Archibald (Name in full)

Regimental Number 754004 serving in 119<sup>th</sup> O.S.B. C.E.F.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

61761

I bequeath all my real estate unto

Mrs Wallace Archibald  
79 Prin St.  
Sault Ste Marie Ont. } Name & Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

Mrs Wallace Archibald  
79 Prin St.  
Sault Ste Marie Ont. } Name & Address of person or persons to receive personal estate\* (see note).

In Witness whereof I have hereunto set my hand this twelfth day of October A.D. 1916.

William Archibald Signature.

\* N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

Name of Witness G. L. Nash.

Address of Witness Echo Bay Ont.

Occupation of Witness Soldier.

Name of Witness D. J. Doyle

Address of Witness Sault Ste Marie Ont.

Occupation of Witness Soldier.

ESTATES BRANCH  
AUG 31 1917  
MILITIA DEPT.

The original will was  
15 AUG 1917  
forwarded to Ottawa.

FORM OF WILL

Name of Testator

Residence of Testator

of the County of \_\_\_\_\_ State of \_\_\_\_\_

do hereby declare that I am of legal age

and of sound mind and memory

at the time of making this my last will and testament

and that I am not under any duress, fraud, or undue influence

of any person, and that I am not insane

at the time of making this my last will and testament

and that I am not a married person

and that I am not under any legal disability

and that I am not a minor

and that I am not a bankrupt

and that I am not a person who is incapable of making a will

and that I am not a person who is under any legal disability

and that I am not a person who is under any legal disability

and that I am not a person who is under any legal disability

and that I am not a person who is under any legal disability

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and that I am not a person who is under any legal disability

FORM OF WILL.

William Archibald

I,

754004

(Name in full) 119th C.S. Bn. C.E.F.

Regimental Number

serving in

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

Mrs. Wallace Archibald

I bequeath all my real estate unto  
79 Prior St.

Sault Ste Marie Ont.

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

absolutely, and my personal estate I bequeath to  
79 Prior St.

Sault Ste Marie Ont.

Name & Address  
of person or  
persons to receive  
personal estate.  
( see note).

In Witness whereof I have hereunto set my hand  
this William Archibald day of October A.D. 191 .

Signature.

N.B. Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

Name of Witness	Echo Bay Ont.
Address of Witness	Soldier.
Occupation of Witness	D.W. Cozle
Name of Witness	Sault Ste. Marie Ont.
Address of Witness	Soldier.

NOTE. W. Archibald No. 754004, 119th Batta.

Killed in action 9-4-17.

Taken from living 11-5-17.

SL.

119 Bn  
Unable Trace to 119 Bn  
Kept

...in the ... of the ...

...the ... of the ...

...the ... of the ...

...the ... of the ...

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...the ... of the ...

...the ... of the ...

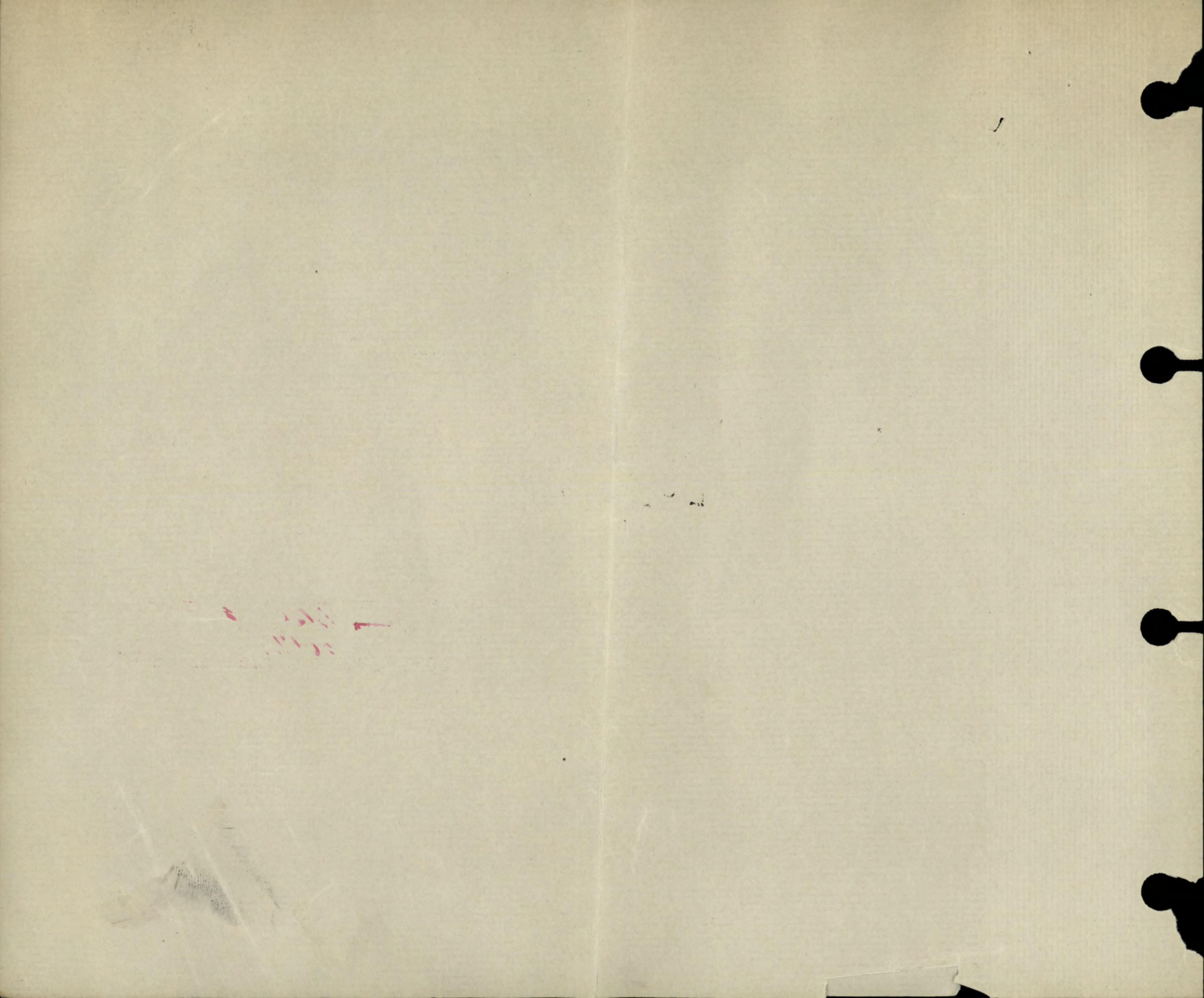
MILITIA AND DEFENCE  
 ASSIGNED PAY  
 OVERSEAS CONTINGENTS

211

*Enc*

To Whom *Mrs Wallace Archibald* By Whom Assigned *Archibald, W.*  
 Address *79 Pine St* Regtl. No. *754004*  
*Sault Ste Marie* Rank *PT*  
*out* Corps *119th Bn*  
 Rate *20<sup>00</sup> Movist/16*  
*2 M 8<sup>11</sup>/<sub>16</sub> a.p.d 19<sup>13</sup>/<sub>16</sub>* PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;">                     Pensions Notified DATE <i>3/5/17</i>                      Killed in Action DATE <i>9/4/17</i>  <i>Ch. (75) 24/4/17 J.A. Goldsmith</i> </div> <i>3 M confirming cas. l- 3 M. 25<sup>4</sup>/<sub>17</sub></i> <i>PT 7<sup>6</sup>/<sub>17</sub></i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				





# ASSIGNED PAY

OVERSEAS CONTINGENTS

*Mrs Wallace Archibald*  
Sheet No. 2.

Name of Soldier *Archibald W. Pte 119th Bn.*

## PAYMENTS.

L. L. Job 4503. - Req. 6332.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			<i>20<sup>00</sup> Nov 1st/16.</i>
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.		<i>D 35907</i>	<i>40</i>	
Jan.	1917	<i>L 37556</i>	<i>20</i>	<i>CFX to 30/4/17 120<sup>00</sup> J.A. Goldsmith 3/5/17</i>
Feb.		<i>L 42638</i>	<i>20</i>	<i>20</i>
March		<i>L 48341</i>	<i>20</i>	<i>20.0.</i>
April		<i>C 300</i>	<i>20</i>	<i>20.0. closed 30/4/17. Cas. No S.A.</i>
May		<del><i>M 6074</i></del>	<del><i>20</i></del>	<i>M 6074 Cancelled. J.A. Goldsmith 3/5/17</i>
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

F. X. Rend. Date *26/1/17* By *120<sup>00</sup>*  
 E.F.X. " Date *26/1/17* By *[Signature]*

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 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.				

890

M 50964 JUL 8 1921

plaque Ref = 28-1-22-

Scroll redesp. 17-1-23. B 2322.

Plaque redesp. 25-1-23 E 903.

~~Plaque Desp. JAN 7 1922 Regn. No. 163801~~

~~Scroll Desp. SEP 2 1921 Regn. No. 257380~~

AR 21 2/9

M 73rd. Bns.

649-A-4052.

754004 Pte. Wm. Archibald. CEF.

Medals & Dec.

(Mother) Mrs. W. Archibald,  
35 Hugh St., ~~79 Pine St.,~~  
Sault Ste. Marie,  
Ont.,  
(17 1/23)

Placque & Scroll

Scr # 764428

(Father) Mr. Wallace Archibald,  
Address as above.

Memorial Cross.

(Mother) Mrs. W. Archibald,  
Address as above.

not eligible for star.  
Elig. " U.M.  
Elig. " B.U.M.  
M.D.

54934

Reg. No. 754004 Name Archibald W. A.  
 Rank Pte Corps 119th Age 20 Service C 6 1/2  
 Ledger No. 1124 Serial No.

HOSPITALS	DATE	DIAGNOSIS
<u>Station Hos. Halifax</u>	<u>31-7-16</u>	<u>Mumps.</u>
<u>Dis to Duty</u>	<u>9-8-16</u>	

6

**HOSPITALS****DATE****DIAGNOSIS**

M. F. W. 2553.

50M-6-19.

1772-39-1332.

REGT'L No 754004.

H. Q. FILE NO. 649-

NAME Archibald William

RANK AND CORPS Pte (Form 19th Bn. no. 73rd Bn)

FOLLOWS  
FOLLOWS

CABLE		NATURE OF CASUALTY
No.	DATE	
M 2581.	22-4-17	Killed in action April 9th 1917
B 2090a	Caen 17-4-17	" " " " "
		France noted 15-6-17

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
6.	Connaught, Aldershot	12-9-16	Not stated.
19.	Klesch	4-10-16	W. D. G.
a193.	Rep from Base	9-4-17	Killed in action







Name *Archibald* Rank *Plt.*Reg. No. *754004*Unit *William*  
*119<sup>th</sup> Batt.*Next of Kin *Canada*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
<i>1916</i>						
<i>12-9</i>	<i>Comm. Hosp.</i>	<i>Aldershot</i>	<i>Not Stated</i>	<i>6</i>		
<i>4-10</i>	<i>Discharged</i>		<i>V. D. G. 19</i>			



No. 754004 RANK *Pte*

NAME *Archibald, Wm.*

T.O.S. 9-2-16

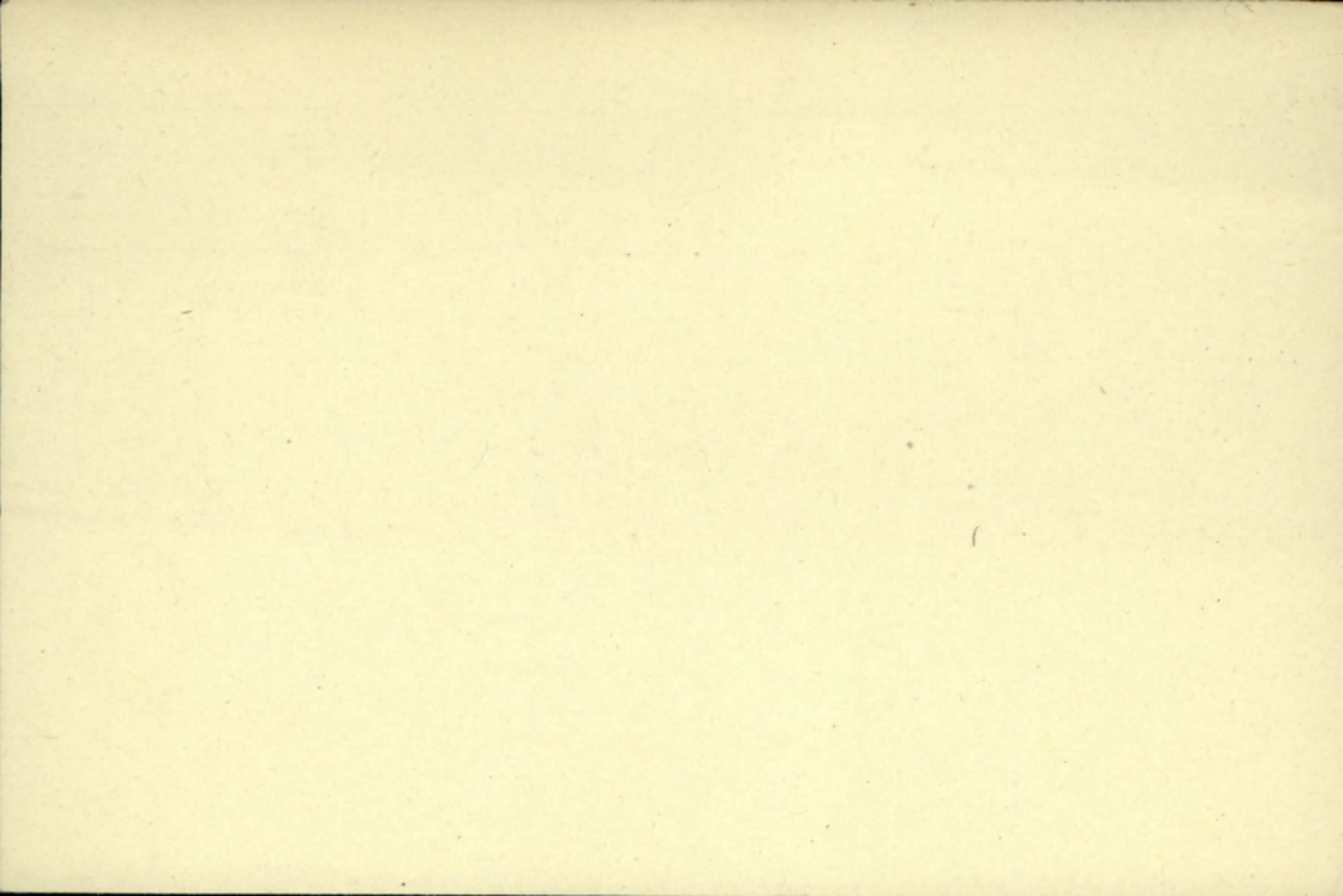
UNIT *119th Battalion*

W.O. 7 of 11-2-16

M. D. *2*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916</i>	<i>1916</i>			
<i>Feb. 9</i>	<i>Feb 29</i>	<i>✓</i>		
<i>Mar</i>		<i>✓</i>		
<i>Apr</i>		<i>✓</i>		
<i>May</i>		<i>✓</i>		
<i>June</i>		<i>✓</i>		
<i>July</i>		<i>n</i>	<i>To hospital July 31/16</i>	<i>B. O. 137 of July Daylis 16</i>
<i>Aug</i>		<i>m.</i>		

UNIT SAILED  
AUG 8 1916



Number 754004 Rank Pl-10  
Surname ARCHIBALD

Christian Name William

Units 73<sup>rd</sup> Bn. Can. Inf Theatre of War France

Date of Service 15-11-16

Remarks (M) Mrs. W. Archibald,

Latest Address 79 Pine St,  
Sault Ste. Marie,

Roll No. B. Page 20443

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

.....

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

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

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

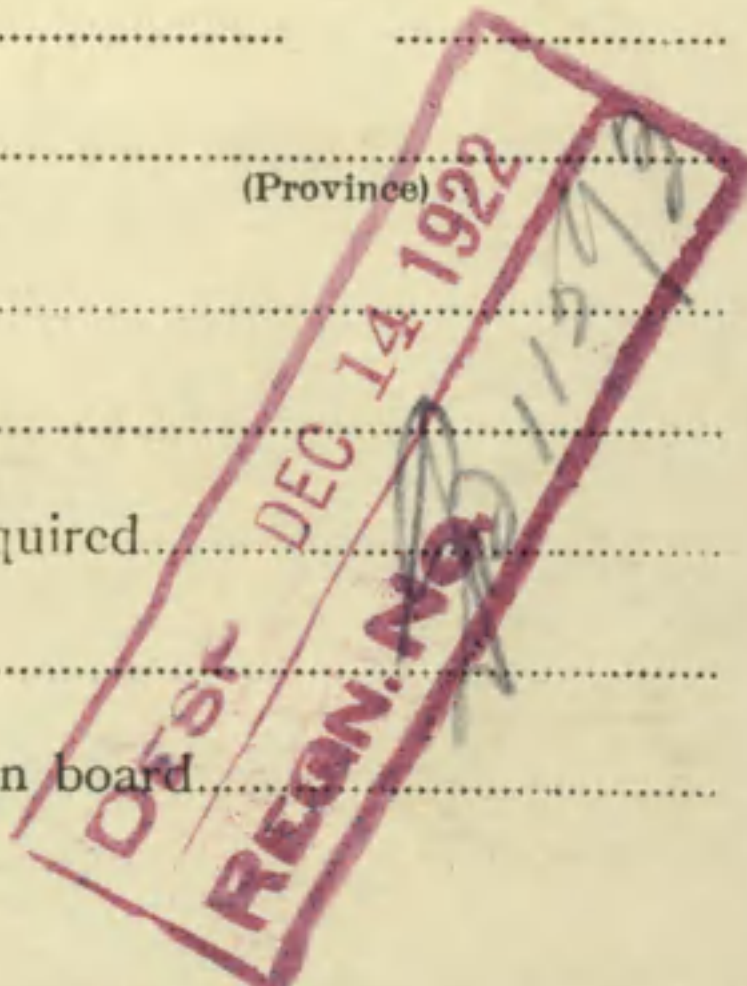
Station in Military District to which a furlough warrant is required.....

..... Railway.....

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

.....  
 tination.....

(Sgd.).....





649-a-4054

CARD NO.

**D** SURNAME. *Archibald*

CHRISTIAN NAMES *William*

REGL. NO. *754004* RANK *Pto.*

UNIT *119<sup>th</sup>* *mil.* *Bu.*

FORMER CORPS

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL *Archibald Wallace*

RELATIONSHIP TO SOLDIER *Father*

ADDRESS *79 Pine St. Sault Ste Marie, Ont.*

COUNTRY OF BIRTH *Canada*, *Marksville*, DATE *July 1<sup>st</sup> 1895*

PLACE OF ATTESTATION *Sault Ste Marie Ont.*, DATE *Feb. 9<sup>th</sup> 1916*

MARRIED

SINGLE

*Yes*

WIDOWER

TRADE OR CALLING

*Fireman*

RELIGION

*Presbyterian*

DESCRIPTION.

APPARENT AGE

*19*

YEARS

*6*

MONTHS

HEIGHT

*5'*

FEET

*8 3/4*

INCHES

CHEST MEASUREMENT

*35 1/2*

INCHES

EXPANSION

*2 1/2*

INCHES

COMPLEXION

*Fair*

EYES

*Blue*

HAIR

*Brown*

DISTINGUISHING MARKS

*Nil.*

MEDICAL EXAMINATION.

PLACE

*Sault Ste Marie*

DATE

*Jan. 17<sup>th</sup> 1916*

*Parent Address.*

*97 Pine St. Sault Ste Marie, Man.*

Surname *Archibald* Christian Name or Names *W.* Reg. No. *754,004*

Rank *Pte.* Unit *119<sup>th</sup> Batt.* Co. *73<sup>rd</sup> Bat<sup>on</sup>* Troop Batty

Hospital *Comnaught. Aldershot* Date of Admission *12. 9. 16*

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

*N. S.*  
*V. D. G.*

(1) Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

*Killed in Action 9-4-17*

DISPOSITION

*Dis.*

*4-10-16* Date

*C.L. 15. 9. 16 #6.*

REMARKS

*C.L. 10-10-16 19*

A.M.D. 2 DEPT.

*- 23-4-17 @ 193.*

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

*1917*

# EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

MARRIED OR SINGLE *Single*  
 PLACE OF BIRTH *Markville, Ont.*  
 NAME AND ADDRESS OF NEXT OF KIN *W. Archibald*  
*79 Rim St., Sault Ste Marie, Ontario.*  
 RELATIONSHIP OF NEXT OF KIN *Father.*  
 NAME AND ADDRESS OF NEXT OF KIN  
 RELATIONSHIP OF NEXT OF KIN  
 SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)  
 PAYABLE TO  
 RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.		
PARTICULARS	EFFECTIVE DATE	AUTHORITY
<i>Killed in action</i>	<i>9/4/17</i>	<i>h.a. 193. 23/17</i>

ADMISSIONS TO HOSPITAL, &c.			
DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL
<i>11/9/16</i>	<i>4/10/16</i>	<i>V.</i>	<i>Connaught Hospital</i>

REG'L. No. *754004* RANK *Pte* NAME *Archibald, William*  
 IF IN PERM. CORPS | WHAT UNIT UNIT *119<sup>th</sup> Bn C.B.I.* TRANSFERRED TO *73<sup>rd</sup> Bn* DATE *14/1/16* AUTHORITY *P20225*  
 PERMANENT FORCE ALLOWANCES TRANSFERRED TO *Sub Dir L.* DATE *10/4/17* AUTHORITY *h.a. 193. 23/17*  
 PLACE OF ATTESTATION *Sault Ste Marie, Ont.* TRANSFERRED TO *NE* DATE *1/5/17* AUTHORITY *h*  
 DATE OF ATTESTATION *Jan'y 10 - 1916* TRANSFERRED TO DATE AUTHORITY  
 ASSIGNED PAY MONTHLY \$ *20.<sup>00</sup>* DATE EFFECTIVE *Nov. 1<sup>st</sup> 1916*  
 PAYABLE TO *Mrs. Wallace Archibald, 79 Rim St., Sault Ste. Marie, Ontario.* RELATIONSHIP *Mother.*  
 ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE  
 PAYABLE TO RELATIONSHIP  
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *25/4/17* EFFECTIVE *1/5/17* REASON *Killed in action, 9/4/17 h.a. 193. 23/17*  
 DISCHARGE DATE AND PLACE REASON AND AUTHORITY  
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)  
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)



Entered on N. I. Card Index *L.D.*  
 Checked by *H. Pillotson*  
 C.9.

Checked *Whitehead*

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		NO. OF DAYS	RATE				AMOUNT		1	2	3	4	1	2				3	4				CREDIT	DEBIT		
		\$	c.	\$	c.		\$	c.	\$	c.		No.				DATE	No.																	DATE	No.
<i>1916</i>																																			
<i>Aug 31</i>														<i>12 33</i>	<i>12 33</i>											<i>12 33</i>								<i>Rec'd from Canada</i>	
<i>Sept</i>	<i>30</i>	<i>1<sup>00</sup></i>	<i>30 00</i>	<i>30 10</i>	<i>3 00</i>									<i>33 00</i>											<i>45 33</i>										
<i>Oct</i>	<i>31</i>	<i>1<sup>00</sup></i>	<i>31 00</i>	<i>31 10</i>	<i>5 10</i>									<i>34 10</i>	<i>179</i>	<i>15/10 222</i>	<i>21/10</i>			<i>12 17</i>	<i>9 73</i>				<i>36 68</i>	<i>42 75</i>								<i>Pro 19. Keep Stoppage KD</i>	
<i>Nov</i>	<i>13</i>	<i>1<sup>00</sup></i>	<i>13 00</i>	<i>13 10</i>	<i>13 0</i>									<i>14 30</i>								<i>20 00</i>		<i>20 00</i>	<i>37 05</i>									<i>14/16 to 4/16 - 24 days @ 60¢</i>	
<i>17-30</i>																									<i>55 75</i>									<i>Issue on repay ment</i>	
<i>Nov 1-31</i>	<i>17</i>	<i>1<sup>00</sup></i>	<i>17 00</i>	<i>17 10</i>	<i>1 70</i>									<i>18 70</i>										<i>20 00</i>	<i>35 69</i>	<i>54 16</i>									
<i>Dec</i>	<i>31</i>		<i>31</i>	<i>31</i>	<i>3 10</i>									<i>34 10</i>	<i>613</i>	<i>2/12</i>	<i>8500</i>	<i>4/11</i>	<i>C.B.I.</i>		<i>11 33</i>	<i>4 36</i>		<i>20</i>	<i>35 69</i>	<i>54 16</i>									
<i>1917</i>			<i>12 20</i>		<i>12 20</i>																														
<i>Jan 1-31</i>	<i>31</i>	<i>1<sup>00</sup></i>	<i>31 00</i>											<i>34 10</i>	<i>726</i>	<i>2/1</i>		<i>21/10</i>	<i>2 61</i>					<i>20</i>	<i>25 40</i>	<i>62 86</i>									
<i>1-28</i>															<i>644</i>	<i>19/12</i>		<i>21/10</i>	<i>2 61</i>		<i>18</i>			<i>20</i>	<i>22 62</i>	<i>71 04</i>									
<i>Feb</i>	<i>28</i>		<i>30 80</i>											<i>30 80</i>	<i>807</i>	<i>15/1</i>			<i>2 62</i>				<i>20</i>	<i>22 62</i>	<i>71 04</i>									<i>71 04</i>	
<i>1-31</i>																									<i>30 46</i>	<i>74 68</i>									
<i>March</i>	<i>31</i>		<i>34 10</i>											<i>34 10</i>	<i>1180</i>	<i>2/2</i>	<i>1090</i>	<i>22/10</i>	<i>2 61</i>		<i>5 23</i>		<i>20</i>	<i>30 46</i>	<i>74 68</i>										
<i>April</i>	<i>9</i>		<i>9 90</i>											<i>9 90</i>							<i>2 62</i>		<i>20</i>	<i>22 62</i>	<i>61 96</i>										<i>Killed in action 9/4/17 h.a. 193. 23/17</i>
<i>May</i>																									<i>61 96</i>										
<i>June</i>																									<i>61 96</i>										
			<i>243 10</i>											<i>12 33</i>	<i>256 43</i>						<i>22 62</i>	<i>31 53</i>	<i>4 54</i>	<i>120</i>	<i>14 78</i>	<i>193 47</i>									

Statement of  
 SEP 19 1917  
 Account rendered

*Can. D.P. 1-11-16 to 30-4-17 \$120.<sup>00</sup>*  
*H.Q. 593-1-12 Dated 3-5-17 R.S.*

*Carried forward*

