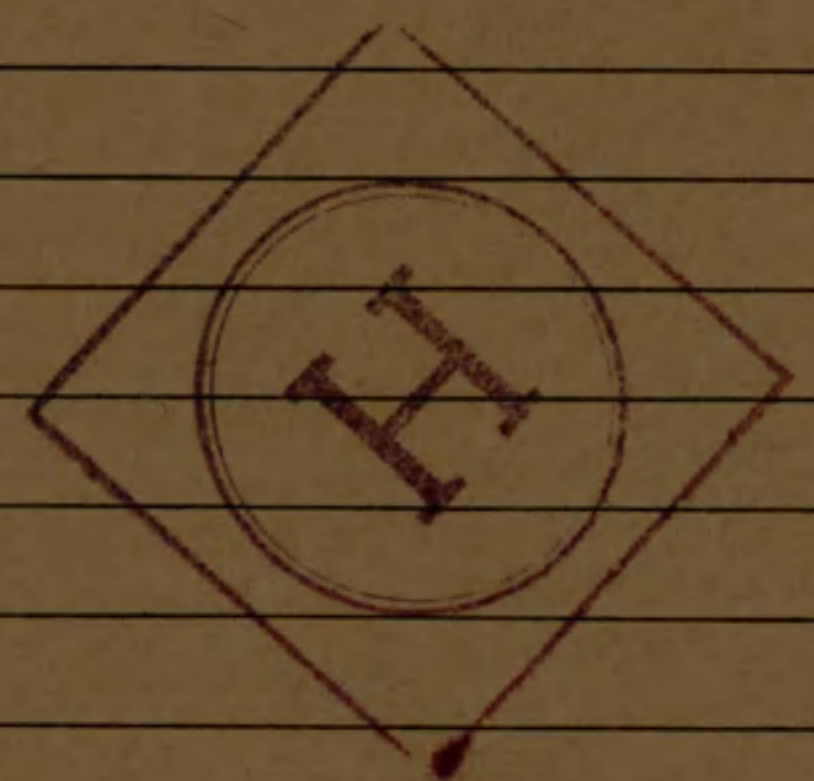


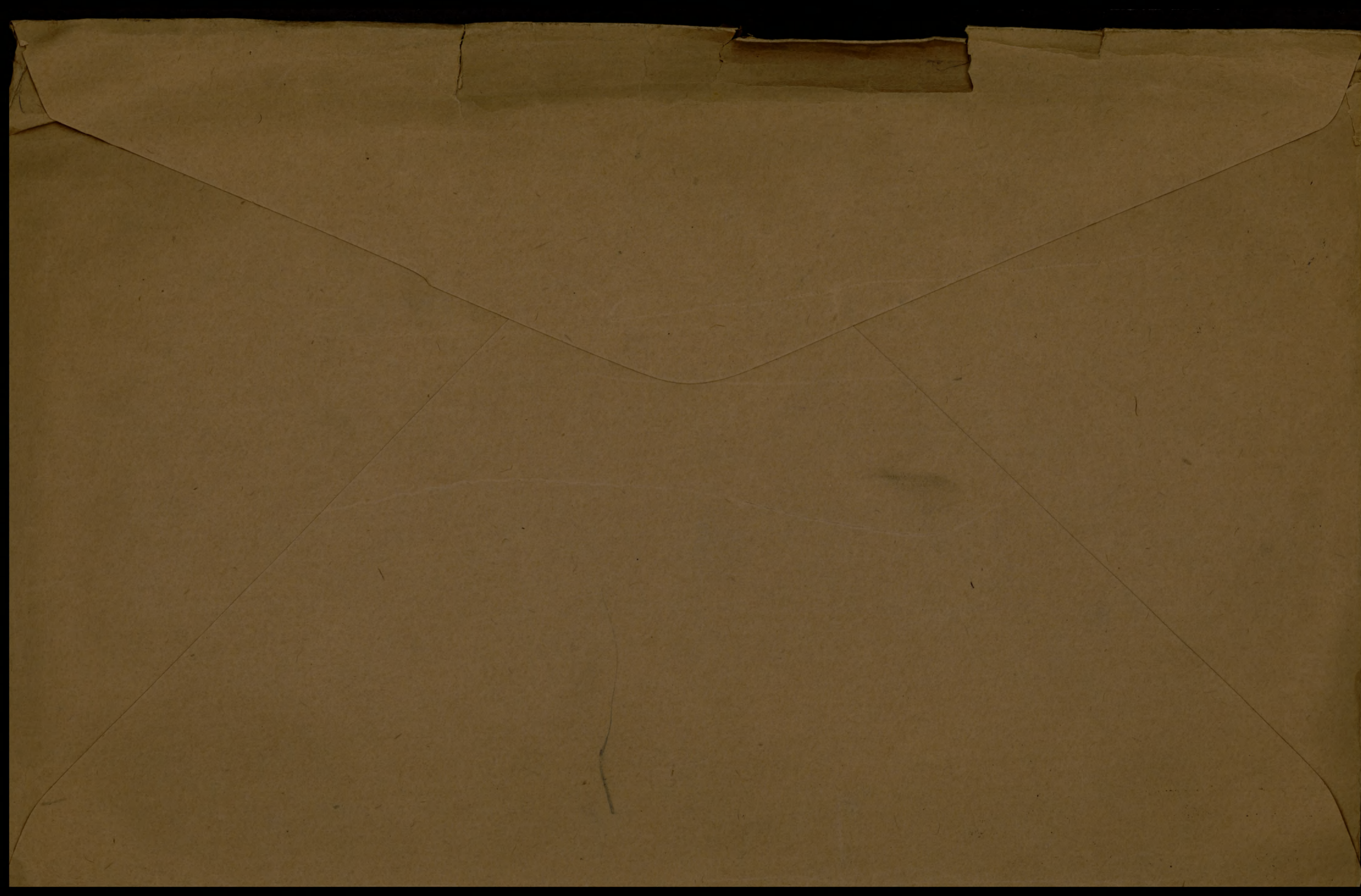
REGIMENTAL DOCUMENTS

NAME Boyle Harold Woodford REGT. NO. 186031 UNIT _____ H. Q. FILE NO. _____

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133, or 51)				M	DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
TRAINING HISTORY SHEET (M.F.W. 113)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					34519
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
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)					
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)					DESERTION
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)					
<i>4 copies made</i>					11/13
<i>1 copy made</i>					22-14
<i>1 copy made</i>					34-14
					1



Mx
1-20-88



Original

ATTESTATION PAPER.

No. 186031

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- 1. What is your surname? **Boyle**
- 1a. What are your Christian names? **Harold Woodford**
- 1b. What is your present address? **Avenue Hotel**
- 2. In what Town, Township or Parish, and in what Country were you born? **St. Malachie, Quebec**
- 3. What is the name of your next-of-kin? **Mrs. F. J. Boyle**
- 4. What is the address of your next-of-kin? **83 McPherson Ave., Toronto Canada**
- 4a. What is the relationship of your next-of-kin? **Mother**
- 5. What is the date of your birth? **1888**
- 6. What is your Trade or Calling? **Brakeman**
- 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. 3 yrs 11th Hussars.**
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**

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, **Harold Woodford Boyle**, 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.

..... (Signature of Recruit)
 Date: **11th November** 1915 *Harold Boyle* (Signature of Witness)
Alfred Volkmann

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, **Harold Woodford Boyle**, 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.

..... (Signature of Recruit)
 Date: **11th November** 1915. *Harold Boyle* (Signature of Witness)
Alfred Volkmann

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... **Winnipeg** this **11th** day of... **November** 1915.
 (Signature of Justice)
A. H. Molyneux

Description of Harold Woodford Boyle on Enlistment.

Apparent Age 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 ft. ins.

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

Complexion **Dark**

Eyes **Brown**

Hair **Dark Brown**

Religious denominations { Church of England **X**
 Presbyterian
 Methodist
 Baptist or Congregationalist
 Roman Catholic
 Jewish
 Other Denominations
 (Denomination to be stated)

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 declares that he is not subject to fits of any description.

I consider him* . . . **fit** for the **Canadian Over-Seas Expeditionary Force.**

Date **11th November** 19**15** .

Place **Winnipeg**

W. J. Walter "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.

Harold Woodford Boyle 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. J. Walter (Signature of Officer)

Date **11th November** 19**15** **90th Canadian Infantry Battalion,**
(Winnipeg Rifles).

nsfers,

X. W.

18-6-20.

33

ORD SHEET

Surname	
Christian Names	
Regimental No.	
Rank	

C.T. Rank Name **BOYLE Harold Woodford** Reg'l No. 186031
 Unit **90TH BN** If in perm. Corps, }
 What Unit? } Married or Single *Single*
 Place and Date of Enlistment *Manitoba 11th Nov 1915* Place of Birth *St. Malachie Quebec*
 Name and Address, Next-of-Kin *Mr. J. J. Boyle*
83 Mc Pherson Av. Toronto Ont. Relationship *Mother*
 Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship
 Discharge, Date and Place Reason Character

I

M

N/E. R.B. No. *5244*
 File R.L. *25-13-3885*
 Category *M.K.A.*

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>19.7.16</i>	<i>90th Bn</i>	<i>td to 11th Bn Sh'cliff</i>	<i>19 7.</i>	<i>Pt II 196</i>	
<i>22-7-16</i>	<i>Ob. 11th Bn</i>	<i>Taken on strength.</i>	<i>Sh'cliff</i>	<i>19-7-16</i>	<i>Pt. II 0174</i>
<i>28.8.16</i>	<i>"</i>	<i>td to 27th Bn Overseas.</i>	<i>"</i>	<i>27.8.16</i>	<i>" 205.</i>
<i>4.9.16</i>	<i>27th Bn</i>	<i>G.O.S. of 27th Bn.</i>	<i>Field</i>	<i>28.8.16</i>	<i>" 35.</i>
<i>18.6.17</i>	<i>"</i>	<i>Repld from Base (Mtd)</i>		<i>3.5.17</i>	<i>P.L. A547.</i>
<i>26.6.17</i>	<i>"</i>	<i>Previously Repld Mtd now Repld Missing</i>		<i>3.5.17</i>	<i>" A554</i>
<i>22.6.17</i>	<i>"</i>	<i>S.O.S. Missing after Action</i>	<i>Field</i>	<i>3.5.17</i>	<i>Pt. II No. 37</i>
<i>10.11.17</i>	<i>M.R. (27)</i>	<i>Prev. Missing now Killed in Action</i>	<i>"</i>	<i>3.5.17</i>	<i>C.L.A. 60.</i>

8 JUN 1916

A.F.B. 103 CHECKED
 27 SEP 1916

CERTIFIED CORRECT.
 11 SEP 1916
 CAN. RECORDS, LONDON.

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

M. F. W. 54.
 150M. 10-15.
 H.Q. 1772-59-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 90th. Overseas Battalion

Regimental No. 186031 Rank Private Name Boyle, Harold Woodford

Enlisted (a) 11/11/15 Terms of Service (a) C. E. F. Duration of War Service reckons from (a) Nov. 11th. 1915

Date of promotion to present rank. } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }

Extended _____ Re-engaged _____ Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
19/7/16	O.C. 90th.	Embarked at Halifax on May 31st. 1916. arrived at Liverpool on June 8th 1916.	St Martins Plains	19/7/16	B.O. 196.
28-8-16	O.C. 11th	Transferred to 27th Bn Overseas		27-8-16	Pt. II. B.O. 205
28 8/16	O. C. C. B. D.	Landed in France. Taken on strength 43rd Cdn. Bn.		28 8/16	Nom. Roll d/ Pt II D.O.
13 9/16	- do. -	Left for 1st Lt. Bn.		13 9/16	Nom. Roll d/
22 9/16	O.C. 17 Bn.	Arrived Unit.		15 9/16	d/
17 5/17		Wounded		3 5/17	188-11 10/16
10 6/17		now reported missing		3 5/17	739-11 6/17

Handwritten notes:
 A.R. Bowden
 90th. Overseas
 Winnipeg 11/15
 away
 35-44
 188-11 10/16
 739-11 6/17
 241-22 6/17
 Pt II 0/37-22 6/17
 P.T.O.

(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. [P.T.O.]

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>Whogau</i> Capt. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.			

ORIGINAL MEDICAL HISTORY SHEET

Surname Bayle Christian Name Harold Woodford

Examined on 11th day of Nov 1915
 at Winnipeg
 Birthplace { City or Town St Malachie
 County Quebec

Approved by J. M. Watson
 Rank Capt M.O.

Apparent age 24
 Trade or occupation Brakeman
 Height 5 Feet 9 Inches
 Weight 150 Lbs.
 Chest measurement { Minimum 36 Inches
 Maximum expansion 38 Inches
 Physical development Good
 Small-Pox Marks none

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 none

Date	Result	VACCINATIONS.
<u>Dec 15/15</u>	<u>Pos</u>	<u>J. M. Watson</u>
		<u>J</u>
		M.O.
		M.O.
		M.O.

When Vaccinated last
 (a) Marks indicating congenital peculiarities or previous disease none

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

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>1915</u>	<u>Pos</u>	<u>J. M. Watson</u>
<u>Nov 26</u>	<u>Pos</u>	<u>J. M. Watson</u>
<u>Dec 10</u>	<u>Pos</u>	<u>J. M. Watson</u>
<u>Dec 17</u>	<u>Pos</u>	<u>J. M. Watson</u>
		<u>J. M. Watson</u>
		M.O.
		M.O.
		M.O.

Enlisted on 11th day of November 1915 at Winnipeg

	CORPS.	REGT'L NUMBER.	HABITS.	DATE.
Joined on enlistment	90th OVERSEAS BATTALION	186031		
Transferred to	<u>24th Bn</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 *Baile* Christian Name *Herold Woodford*

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				
<i>Broadway Hall</i>	<i>Dull Nov 11/15</i>	<i>25</i>	<i>12</i>	<i>1915</i>	<i>31</i>	<i>12</i>	<i>1915</i>	<i>Infected Arm</i>	<i>6</i>		<i>JPR</i>

MEH

Number 186.031 Rank Pte

MEH

Surname BOYLE

Christian Name Harold Woodford

Units 27 Bn Cany Theatre of War France

Date of Service 28-8-16 D

Remarks Mrs. F. J. Boyle (Mother)

Latest Address Marys. apt.:

103. Waverley. St.

Ottawa. Ont.

Roll No.

Page 19775

80001-2-57

DESP NOV 21 1922
REGN:IND
220534

(649-B-16787)

CARD NO.

D

SURNAME. Boyle

CHRISTIAN NAMES

Harold Woodford

FOLL.

REGL. No. 186031

RANK Pte

UNIT 90th

Bw.

FORMER CORPS 11th Hussars.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Boyle, Mrs. F. J.

RELATIONSHIP TO SOLDIER

Mother

ADDRESS

~~83 McPherson Ave.~~

~~Batiscan Station, Champlain Co., Toronto, Ont.~~

P. Q. with L. 6/9/17

COUNTRY OF BIRTH

Canada, St. Malachie P. Q.

PLACE OF ATTESTATION

Winnipeg, Man.

DATE

Nov. 11th 1915

0/231/5/16 442
4

MARRIED

SINGLE

Yes.

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

W. H. F. ...

REGT'L. NO. 186031

NAME Boyle Harold Woodford

H. Q. FILE NO. 649

RANK AND CORPS Pvt 27th Bn 1st Div

FOLLOWS NO. 10th Bn
FOLLOWS

CABLE

NATURE OF CASUALTY

NO. DATE

NO.	DATE	NATURE OF CASUALTY
M 5586	17-6-17	Reported wounded May 3rd/17
M 5634	26-6-17	Prev. Rept. W.D. Now. Rept missing. May 3 rd 1917.
M 6335	13-11-17	Prev. rept. missing now killed in action. May. 3 rd , 1917. ✓
Adm Rept	1-11-17	(Rec'd 25-11-17)
B 2090	2-12-17	Killed in action 3-5-17. (Prev. rep. Rowen missing) Rec'd 16-4-18.

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

A 547.	Rep. from Base	3-5-17.	Wounded (not stated)
A 55-4.	prev rep wounded	now rep	Missing
A 60.	Prev. Rep. missing	Now Killed in Action	3-5-17.

No. 186031 RANK *pte*

NAME *Boyle H.*

W.

T. O. S. 11-11-15-

UNIT *90th Battalion*

D.O. #6-22-11-15-

M. D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915- Nov. 11</i>	<i>1915- Nov. 30</i>	<i>✓</i>		
	<i>Dec.</i>	<i>✓</i>		
<i>1916</i>	<i>1916</i>			
	<i>Jan.</i>	<i>✓</i>		
	<i>Feb.</i>	<i>✓</i>	<i>forfeits 1 day pay a. w. c.</i>	<i>Feb. payroll.</i>
	<i>Mar.</i>	<i>✓</i>		
	<i>Apr.</i>	<i>✓</i>		
	<i>May</i>	<i>✓</i>	<i>drunk fined \$7.00 C.C. Credit ret'd. J.O. & 11-11-15</i>	<i>B.O. 126 May payroll.</i>
	<i>June</i>	<i>✓</i>		

UNIT SAILED

MAY 31 1916



11 1

Name **BOYLE, Harold** Rank **Pte.**
 Unit **Woodford.**
27th. Battalion.
 Next of Kin **Canada.**

Reg. No. **186031**
25-73-3885.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917.						
3-5.	Reported Wounded.		N.S.	A547.	M. 5586.	18-6.
3-5.	Missing			A. 554/	5634.	26-6.
3-5-17.	From Rptd:	<u>KILLED IN ACTION</u>				Let from 4,633 Bureau file

SURNAME

CHRISTIAN NAME OR NAMES

REG. NO.

BOYLE.

H.W.

186031.

RANK

UNIT

Co.

TROOP

BATTY.

Pte.

Man. 27.

HOSPITAL

DATE OF ADMISSION

1.

HOSP.

2.

HOSP.

3.

HOSP.

4.

HOSP.

DIAGNOSIS

1.

2.

P³.R.MISSING. NOW.KILLED IN ACTION. 3-5-17.

DISPOSITION

DATE

C.L. 12-11-17. A60.

REMARKS

A.M.D. 2 DEPT.

Beh. of D.G.M.S. O.M.F.C. London,

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.

✓ BOYLE, Pte. Harold W., ^{Woodford} No. 186031, 27th Bn. 649 B 16787 ✓

Not eligible for stars.

MEDALS & DECORATIONS, Mother, F.J. Boyle, ¹³⁰ ~~Batiscan Station,~~ ~~Champlain Co., P.Q.~~ *M*

H-T. 30 ¹⁰/₂₂

*Marys. apts.
103. Waverley ST.
Ottawa Ont.*

PLAQUE & SCROLL, Mother, as above.

(Serial no. 792178)

MEMORIAL CROSS, Mother, as above.

Resp JUN 26 1920 *Em 1613525*

MAI 17 1920
Scroll Desp. _____ Reqn. No. *29219*

JAN 25 1922
Please Desp. _____ Reqn. No. *165605*

ES 18/6/20.

My -

114

Ent.

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

To Whom *Evelyn A. Boyle*
Address *Batuscan Station*

By Whom Assigned *Boyle H W*
Regtl. No. *186031*

Rank *pte*
Corps *90 Batt 5 Coy*

Rate *#15.00*

P. Q.
JUN 1916

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<div data-bbox="1677 1009 2508 1394" data-label="Text"> <p>Pensions Notified Date... <i>5/7/17</i> Killed in Action Died of Wounds } Date... <i>3/5/17</i> Missing } C. L. <i>(14) 27/6/17</i> Clerk <i>J. H. Goldsmith</i> Date Noted... <i>5/7/17</i> 1917</p> </div>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

closed

1885

1885

1885

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 50m.-416.
 1772-39-812.

Sheet No. 2.

L. L. Job 310.—Req. 6574.

Evelyn A. Boyle

PAYMENTS.

Name of Soldier

Boyle H.W.

186031
\$15.00

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June		<i>#5562</i>	<i>15</i>	
July		<i>V11327</i>	<i>15</i>	
Aug.		<i>E 10471</i>	<i>15</i>	
Sept.		<i>Y 15374</i>	<i>15</i>	
Oct.		<i>Y 19896</i>	<i>15</i>	
Nov.		<i>Q 24635</i>	<i>15</i>	
Dec.		<i>A 30064</i>	<i>15</i>	
Jan.	1917	<i>B 37136</i>	<i>15</i>	
Feb.		<i>B 42809</i>	<i>15</i>	
March		<i>C 49751</i>	<i>15</i>	
April		<i>L 712</i>	<i>15</i>	
May		<i>36942</i>	<i>75</i>	
June		<i>H 13352</i>	<i>15</i>	
July		<i>C 19848</i>	<i>15</i>	
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

JUN 1916

E. X. Rend. Date *Total \$ 195*
 E. F. X. " Date *10-1-15* by *Traly.*

15
15-00
15-B.
C.F.X. to 30/6/17 195⁰⁰ J. Goldsmith 5/7/17
15-15 Acct. closed 30/6/17 Cas.
B. C 19848 Cancelled. J. Goldsmith 5/7/17

OK

60

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.				

