

b Coy. Kirkfield

Feb 9 1916
OK. [Signature]

ATTESTATION PAPER.

109th OVERSEAS BATTALION, C. E. F.

No. 726118

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

ORIGINAL

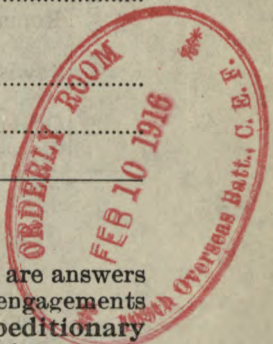
QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... The Cushman
- 1a. What are your Christian names?..... Archie Rockie
- 1b. What is your present address?..... Kirkfield Ont
2. In what Town, Township or Parish, and in what Country were you born?..... Twp of Neuston Ont
3. What is the name of your next-of-kin?..... Elizabeth M. Cushman
4. What is the address of your next-of-kin?..... P.O. Kirkfield Ont Can
- 4a. What is the relationship of your next-of-kin?..... Wife
5. What is the date of your birth?..... July 13th 1883
6. What is your Trade or Calling?..... Carpenter
7. Are you married?..... Yes
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?..... 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

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Archie Rockie The Cushman, 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 Feb 10th 1916 A. C. The Cushman (Signature of Recruit)
Prof Rowley (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Archie Rockie The Cushman, 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 Feb 10th 1916 A. C. The Cushman (Signature of Recruit)
Prof Rowley (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 Rowley this 10th day of February 1916.

[Signature] (Signature of Justice)

b
 [Handwritten marks]

Description of Archie Lochie McEachern on Enlistment.

Apparent Age.....32.....years7.....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 10 1/2.....ins.

Chest measurement { Girth when fully expanded.....38.....ins.
 Range of expansion.....4.....ins.

Complexion.....Fair.....

Eyes.....Blue.....

Hair.....Brown.....

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

Scar on right knee cap

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.....Feb 10th.....1916.....

Place.....Sunday.....

J. McCulloch Capt.
H. Boyd Medical Officer.....
 109th Overseas Battalion, C. E. F.

*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.

Archie Lochie McEachern.....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)
 O. C. 109th Overseas Battalion, C. E. F.

Date.....FEB 10 1916.....1916.....

REGIMENTAL DOCUMENTS

Pte. NAME **McEACHERN ARCHIE, LOCHIE** REGT. NO. **126118** UNIT **#320** H. Q. FILE NO. **3-7-19 mhw**

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505 REFERENCE

NON-EFFECTIVE BY

1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)

3 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

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

2 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)

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)

DENTAL HISTORY SHEET (M.F.B. 465)

11 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

MEDICAL EXAMINATION (M.F.W. 129)

2 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)

LAST PAY CERTIFICATE (M.F.W. 44)

1 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)

2 Music
1 CN 3

2 Gas cards

1 Parf & Band
1 Ret'd. MED

M

Deceased 14-11-52

12836

DEATH

Category

DISCHARGE

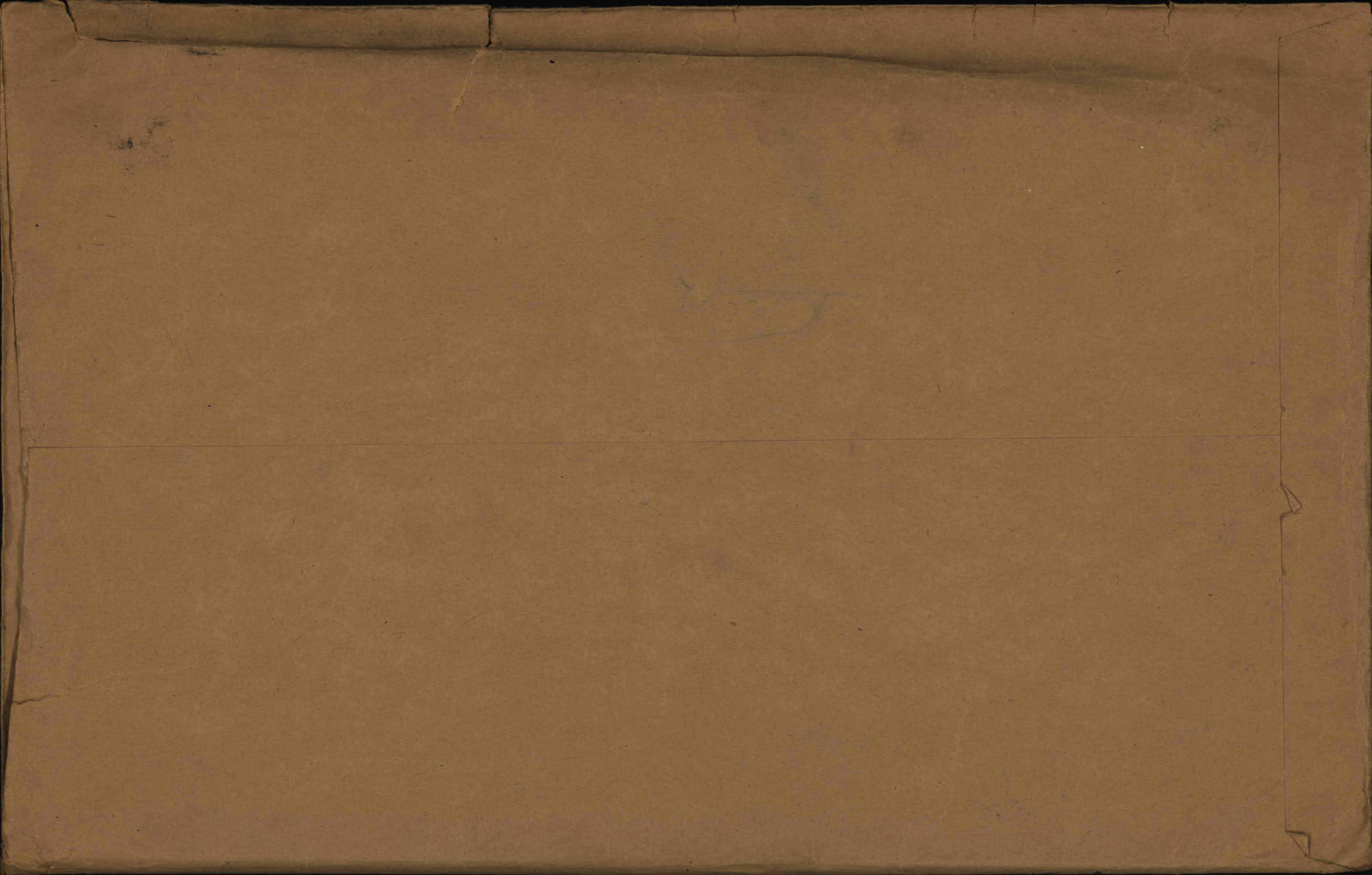
Category

Med Unit on Decease

DESERTION

3-4
18-4
32-4
6

I



SURNAME.

McEachern

3

CARD NO.

Sold. Disc. 5/6/19

CHRISTIAN NAMES

Archie Lochie

Do 157/6/6/19/1

FOLL.

Demit # 2500

REGL. No.

726118

RANK

Pte.

UNIT

109th.

Batt.

FORMER CORPS

Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

McEachern, Mrs. Elizabeth

RELATIONSHIP TO SOLDIER

Wife

ADD

112 Wainman St.,

North Lindsay, Ont

(see p. 4-2-18)

COUNTRY OF BIRTH

Canada, Victoria Co, Ont.

DATE

July 13th. 1883.

PLACE OF ATTESTATION

Lindsay

DATE

Feb. 10th. 1916.

Sailed from Halifax, Per S. S. 488 Pte. 25/4/1908

L. L. 505A - M. & D. 612

"Olympic." 23-7-16

M. F. W. 22. 100m. -1-16. H. Q. 1772-50-522

MARRIED

Yes

SINGLE

WIDOWER

TRADE OR CALLING

Labourer

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

32 YEARS

7 MONTHS

HEIGHT

5 FEET

10 1/2 INCHES

CHEST MEASUREMENT

38 INCHES

EXPANSION

4 INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

Brown

DISTINGUISHING MARKS

Scar on right kneecap.

MEDICAL EXAMINATION.

PLACE

Lindsay

DATE

Feb. 10th 1916.

No. 726118.

RANK

Pte

NAME

McEachern D. L.

T. O. S.

9-2-16

UNIT

109th Battalion

D.O. 71 11-2-16.

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Feb-9.	1916. Feb. 29	✓		
Mar.		✓		
April.		✓		
May		✓		
June.		✓		
July.		✓		

UNIT SAILED

JUL 23 1916



gm
Haw

Atlet
B

Number... *726118* Rank.....

Surname... *McFACHERN*

Christian Name... *Archie Lochie*

Units... *21st Bn CAN ex* Theatre of War... *France*

Date of Service... *5-10-16*

Remarks... *240 Barris Rd*

Latest Address... ~~*As PP*~~ *Orillia Ont.*

~~*Lindsay Ont.*~~

Roll No. *B. Page 8220*

DESP NOV 18 1921

REGN. NO. GA 57650

✓ ARCHIE. LOCHIE. ✓

Name MC EACHERN Rank PLT Reg. No. 726118
 Unit 4 T.H.C.L.T.M.B. C. McEachern
 Next of Kin 21 BATT. RO. Kirkfield Ont.
CANADA.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
13-3-	No 4 Com F Amb	Pluistry	A 172			15278-
27-3.	12. Com. Hd. Amb.		A 181			16010
29-3.	11. Com. Hd. Amb.	bornea. Ulen Pt	A 182			16227
1-4-18	DISCHARGED			A 4226		REG. 18/11/18
14-4	No 1 Aus. 9th. Troop	S. W. RE. Tosa	A 226			823-16
22-4	Portfolk W.S.H. Troop	Perwerch	DO B 26			16843.
11-5-	Mil (Cons) Epsom		DO B 26	Q 272		17940
29	DISCHARGED			B 81		7044
	(29-7-18) Not proceed on	8-8-19 to Gen Depot				
		1cliffe Epsom, Me.				1679.
13-10	8th B. Coy	St. Albans	A 136			17950
15-10	1st B. Coy	St. Albans		3357		17917

726118

FR McEACHERN

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1919						
7.1.19	15 l. l. H. Tahlou		GSWY. Wrist	B 413	✓	4533
15.3	5 l. l. H. Kirkdale		Do	B 473	✓	8719
14.4	Inval. to Bonada		Do			8579
	SX 500	In. D. 3				

Name **MCEACHERN Archie Lochie**
 Rank **Private**

Reg. No. 726118

Unit **21st Battalion**

Next of Kin **Canada**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
16-2-17	18. Gen Hosp D.	Camiers	Influenza	Slt. A449		
17-2-17	Do 20. Gen Hosp D.	Camiers	Influ & Soabies	Slt. A450		
1-3-17	Do 6. Con Depot	Etaples	Do	A458		
6-3-17	Do Discharged To	Details Camp	Do.	A463.		
13-7	<i>To Field Ambulance</i>		<i>Sick</i>	<i>per-3rd</i>		
24-7	<i>Rejoined Unit</i>		<i>Boils</i>	<i>4577</i>		

LEDGER No. 1713

OS SERIAL No. C 9. 107. 37

REG. No. 726118 NAME McEachern Archie

RANK Pte CORPS 355 AGE 40 SERVICE 38/12

HOSPITALS DATE OF ADMISSION
1 Queens Mill Kingston 26-4-19

2

3

DIAGNOSIS GSW L arm by median nerve /

TRANSFERRED TO _____

DISPOSITION 35500030-5-19 CATEGORY _____

M.F.W. 2553.
1126-D.P.-50M-12-18.
1772-39-1332.

Surname

Christian Name or Names

Reg. No.

McEachern

A.L.

726118

Rank

Unit

Co.

Troop

Batty.

Pte

21st Bn

46. L. T.M.B.Y.

Hospital

E.O.

Date of Admission

Transferred

18 Gen Dannes Camiers 16-2-17
20 Gen Dannes Camiers 17-2-17

46. L. T.M.B.Y. Dep Etaples Hosp. 1.3.17
4 Can. Fed Amb. Hosp. 13.3.18
12 C. F. Amb. x Hosp. 27.3.18

Diagnosis

Infl'za & Scabies

(1) Later Diagnosis (if changed)

Pleurisy *noted* x
Corneal ulcer R. E.

(2)

(3)

S. W. Rt. Toe

Additional Diagnosis: if more than one state present

Gen. L. Cornea
G.S. W. Wrist L.R.

DISPOSITION

Date

C.L. 26-2-17 A449,

27-2-17 A450

REMARKS

9.3.17 A458.

15.3.17 A463.

Dis. to Det. Camp. 6.3.17

6.8.17 A475.

R.F.B. to 7. amb. 13.7.17

8.8.17 A477.

Rej. unit 24.7.17 sick.

28.3.18 A172.1

Dis. 1-4-18

10.4.18 A181. x

Disch. 29.7.18

11.4.18 A182. v

1-6-18 A226

Inv. Canada

3.6.18 B26.

A.M.D. 2 DEPT 14.4.19

7.8.18 B381

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

19.10.18 A349/2

per sailing list

20.2.19 B473

500W

Rw

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	"Can. Lamb."	29-2-18
2.	1. Aust. Gen. Rowen Norfolk War. Hospital	14-4-18 22-4-18
3.	Woodcote Pl. Epsom	11-5-18
	18 G. Laminier	13-10-18
4.	Norfolk Hospital	15-10-18
	15 V. G. H. Taplow	7-1-19
5.	S. C. G. H. Kirkdale	15-3-19.
6.		
7.		

Ch. 25. 10-18 B352

9. 1. 19 B.413

20 3. 19. B.473.

17. 4. 19. B496.

INVALIDED TO CANADA. 14. 4. 19. W

Name **McEACHERN Archie Lochie** Rank **Pte.** Regtl. No. **726118**

Fyle Depot **3-M^e 543**

Original unit **109th Bn** Present unit **21st Bn.** M. or S. Age **36** Religion **Pres** Ref. H.Q.

Port, ship and date of arrival **Portland, Me. "Arquaya" 25-4-19**

Next of kin **Mrs. McEachern, Lindsay, Ont.**

Address on leave **Same**

Address on discharge

Transportation issued Yes No Date Character on discharge

Previous occupation **Labourer** Date and place of enlistment **Lindsay 10-2-16**

Diagnosis **G.S.W. Left arm** Date of Medical Boards **27-5-19 Med. Inspector**

LOCAL CARD
No. 3 District Depot

Date.	Remarks.	Pt. 2 Order No.
T.O. 10	From Clearing Depot	
26-4-19	Posted to Hospital Section: Queen's 17th	HS 120
28-4-19	Granted leave with subsistence to 12-5-19	HS 120
30-5-19	Transferred to Cas Coy	HS 150
30-5-19	T.O.S. from H.S. Queen's 30-5-19	CC 150

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

(over)

Date.

Remarks

Pt. 2 Order No.

5-6-19. 108. # 300R. 8. 1420. 112-156

McEachern, A.L. Pte. 726118 21st Battalion.

Will detached by Paymaster, 109th Battalion, C.E.F.

H. J. Williamson (Capt)
P. M. 109th Batta C.E.F.

52870

- 20 -

Perforated sheet for Will from Pay Book of Reg.

No. *726118*

Name *Archie L. McEachern*

Unit *C Coy 109th Bn. Can. Inf.*

Military Will.

*I hereby give and bequeath
all my personal effects
and belongings to my wife
Mrs Elizabeth McEachern
Windsor, Ontario Canada*



*Wm Hall
Windsor
MR Swann
Business*

Signature *Archie L. McEachern*

Rank and Regt. *Pte. 109th Bn. Can. Inf.*

Date *Oct 1st 1916*

Lindsay

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 726118 (Rank) Private

Name (in full) McCaehern, Archie Lochie enlisted in

the 109th Overseas Battalion

CANADIAN EXPEDITIONARY FORCE at Lindsay, Ont. on the

day of February 19 16.

HE served in Canada, England and France

and is now discharged from the service by reason of being medically unfit for further

War Service. Authority Med. Board D/27-5-19 R.O. 1420

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:—

Age 35 yrs. 11 months Marks or Scars

Height 5 ft. 10 1/2 ins. Wound scars on left forearm.

Complexion Fair

Eyes Blue

Hair Fair

A. McCaehern
Signature of Soldier

R. H. Maple
Issuing Officer Lieut.
O. O. Discharge Section
No. 3 District Depot
Rank

Date of Discharge 5-6-19

Appointment

Signed at Kingston, Ont. this 5th day of June 19 19

in Military District No. 3

File Reference No. 3DD-3-Mc-543

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. (Rank) Name

Unit

Address on Discharge

Character and Conduct

Former Occupation

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at this day of 19

On demobilization the particulars called for on the back of this certificate will not be completed.

Name of Officer

Rank

Appointment

A.C. Rank *Plt* Name **MCEACHERN, Archie Lochie.** Reg'l No. 726118 ✓
 Unit **109th. Bn.** If in perm. Corps, }
 What Unit? } Married or Single **Married.**
 Place and Date of Enlistment **Lindsay. Feb. 10th. 1916.** Place of Birth **Tp. Verulam,**
Ont.,
 Name and Address, Next-of-Kin **Elizabeth McEachern.**
P.O. Kirkfield, Ont., Can., Relationship **Wife.**

Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

N/F R.B. No. **15707**
 File R.L.
 Category **Can MR**

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.				
<i>C</i>	Arrived in England per H. M. T. 2310			31-7-16	
5-10-16	109 th Bn	S.O.S. to 21 st Bn	Brams Hall	5-10-16	Pt II. DO. 279
9-10-16	21 st Bn	<i>Taken with strength.</i>	Field	6-10-16	II 58.
6-1-17	"	Atch 4 th Can T. Co. Batty	"	14-12-16	" 2.
2					
26-2-17	"	Adm No 18 Gen Hosp	Dannes Camiers	16-2-17	BLA 449 Influenza set.
27-2-17	"	Transf to No 20 Gen Hosp	Dannes Camiers	17-2-17	" 450 " and scabies
9-3-17	"	" " No 6 Conv Depot	Etaples	1-3-17	BLA 458 " "
15-3-17	"	Discharged to Details	Camp	6-3-17	" 463 " "
8-8-17	"	Rejoined Unit.	Field.	27-7-17	COLA. 577. (Sick.)

A.F.B. 103 CHECKED
10 OCT 1916

Enlist

600

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Rank	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.					
5-8-17	21 st Bn	Rept from Base to Field Ambl ^e	Field		13-7-17	CL 575 Sick.
6-11-17	21 st Bn	SOS to 4 th Can. Light T. A. Battery	PLG		2-10-17	Pr 2096 4 th C.L.T.M.B. R-11-11-17
4/5/18	4 C.S.T.M.B	Ins "W". posted to Gen Dep	Field		21/4/18	14 (Gen. Dep. D.O. 1294/31.5.18) T.O.S PTE
1. 8. 18	Gen. Depot	ceases Hosp & is on Com. 1 st C. B. D	Staff		29.7.18	D.O. 181
10.8.18	Gen. Depot	ceases on Com. 1 st C. B. D	Staff		9.8.18	D.O. 189
12.8.18	Gen. Depot	S.O.S to 6th Res. Bn	Staff		9.8.18	D.O. 190 6 th Res. Bn. D.O. 189 d/12.8.18.
5.9.18	6th Res.	Posted to 21st Bn of.	Seaford		4.9.18	210. d/12.9.18. 21st Bn D/O 69
19.10.18	COR.	Wounded	Field		13.10.18	CL A 349. G.W. Larm CORD D/O 270
23.10.18	21st Bn	Posted to COR	"		15.10.18	PI D/O 86. d/29.10.18.
17. H. 19.	C.O.R.	Ino. to Canada. Exp.				
		5 th Bn., S.L. 500 M.D.3	Kirkdale		14. H. 19.	C.L.B. H 96.
10-4-19	- D.O.	ceases as patient in Hosp & is SOS to C.L. 4 in Canada -	Witley		14-4-19	PI II/63

CHECKED
18

Date.
OK

Sheet No. 1.

W.R.

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

1. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-38-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 109th OVERSEAS BATTALION, C. E. F.

Regimental No. 426118 Rank Private Name McEachern Archie Lochie

Enlisted (a) 10/2.16 Terms of Service (a) D of W Service reckons from (a) 10/2.16

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) Laborer

CERTIFIED CORRECT,
2 OCT. 1916
CAN. RECORDS, LONDON.

Report Date	From whom received	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.
-------------	--------------------	---	-------	------	--

		Embarked Canada	Halifax	24.7.16	
		Disembarked England	Liverpool	31.7.16	

Transferred for Overseas Service with 2/1st Batt'n OCT 5 1916 D.O. Pt. 11 No. 279 Capt.

	C.B.D.	Arrived & Taken on Strength	C.B.D.	6/10.	ADJUTANT
	Do.	Left for unit.	en route.	20/10.	109th Overseas Battalion, C. E. F.
					Pt. II. O. 55. 9/9-10-16.
					N.R. 20/10.
					ADJUTANT,
					109th BATTALION CAN. INFANTRY.

21st BATTALION	Do	joined unit.	21st BATTALION	22/10.	B. 213. 27/10.
		att'd. 4 th Can S.M. Batty.	in the field	14/12	B-213 15/12 Pt. II O. 2. 6/1
17/2/17.	18 Gen Hosp.	Scabies. to	20. Gen Hosp.	17/2/17	W. 3034.
16/2/17.	18 Gen Hosp.	Influenza adm.	18. Gen Hosp.	14/2/17	W. 3034.
17/2/17	20. Gen Hosp.	Influenza & Scabies.	20. Gen Hosp.	17/2/17	W. 3034.
10/2/17.	4. C.F.A.	Do adm	4. C.F.A.	2/2/17.	A36. Dec 272. 3/3/17.
1/3/17.	6. Con Depot.	Do scabies adm	6. Con Depot.	1/3/17.	W. 3034.

(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.]

726 118

McEachern, A.L.

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				
	5 C.F.A.	Influenza adm	5 C.F.A.	31-1-17	{ a36 3/2
	Do	Transferred to	CRS. (4 C.F.A.)	2-2-17	{ D.C.S.
	20 General	Influenza & scabies.	6 Can. Dep.	1-3-17	W. 3034
	6 C.C.S.	Influenza adm.	6 C.C.S.	13-2-17	{ a36 18/2
	Do	Transferred to	17 A.S.	15-2-17	{ D.C.S.
	6 Can. Dep.	Classified "A" to	Details Camp.	6-3-17	W. 3034.
	C.B.D.	Taken on from Etaples "A".	C.B.D.	9-3-17	N.R. 7/3
	Do	Left for 2nd Entrenching Battalion.	Field	19-3-17	N.R. 17/3
	2nd Ent. Bn.	Arrived from C.B.D.	2nd Ent. Bn.	21-3-17	N.R. 21/3.
	Do	Left to go in unit.	En route	14-4-17	N.R. 14/4.
21/4.	21st Bn	at duty from hospital	Field	14/4	B-213
7-7-17	4 Can. S.M.B.	attd. 4th Can. S.M.B.	Do	4/7.	B-213.
21/7	Do	Sick to	Hospital	13/7	B-213. DCS-320 d/31-7-17.
28/7	Do	at duty from hospital	Field	24/7	B-213. DCS-321 d/4-8-17.
	1 C.F.A.	Boils - arm & leg. adm	1 C.F.A.	19/7	{ a36 24/7
	Do	Discharged to	DUTY	24/7	{ D.C.S. 324 d/17-8-17.
18/8	4 Can. T.M.B.	Joined 2 Div. Training Bn		14/8	B-213.
25/8	Do	Rejoined 4 Can. S.M.B.	Field	20/8	B-213
	A.A.G.	S.O.S. 21st Bn. on transfer			File K.A. 16/26273.
	Can. Sec.	to 4th Can. T. M. Battery.	Field	2-10-17.	Pt. 2.O. 96 d/6-11-17.
	"	J.O.S. "	"	8 10/17	It is not d/11/17
29/1/17	42 MB	Granted 14 days leave		24/1/17	B-213. Glo d/11/18
12/1/18	"	Rejoined from "		9/1/18	B-213.
12.3.18.	17 CFA	Splenicy Ln.	12 CFA.	12.3.18.	D 7557.
13.3.18	4 CFA	- do -	4 CFA.	13.3.18.	D 7900
26 3/18	2 "	- do	2 "	26 3/18	D 7544
27 3/18	12 "	do	12 7A. 66RS.	27 3/18	E 335.
29 3/18	12 "	do	11 67A.	29 3/18	B 516
2 4/18	11 "	Ulcer	Duty	14/18	E 2095
13-4-18.	6 CFA	Esso. Toe. Rt.	Do CFS.	13-4-18.	E 3571.

Casualty Form - Active Service.

Rank *Pte* Regiment or Corps *4th Can. Div.* Surname *McEachern* Christian Name *Andrew Lorain*

Religion Age on Enlistment years months

Enlisted (a) *10.2.16* Terms of Service (a) *D. of A.* Service reckons from (a) *10.2.16*

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

Extended { } Re-engaged { } Qualification (b)
or Corps Trade and rate

Occupation Signature of Officer

Report		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.
Date	From whom received				
			Embarked ...		
			Disembarked ...		
<i>13.4.18</i>	<i>14 Cht. Sub.</i>	<i>Ret'd from hospital</i>	<i>England</i>	<i>31.7.16</i>	<i>✓</i>
<i>14.4.18</i>	<i>1 Aust. Gen.</i>	<i>Sw. R. Coe</i>		<i>5.4.18</i>	<i>B. 213</i>
<i>20.4.18</i>	<i>5 T.M.B.</i>	<i>To Hospital</i>		<i>14.4.18</i>	<i>E. 4763.</i>
<i>21.4.18</i>	<i>1 Aust. Gen.</i>	<i>Sw. R. Coe.</i>	<i>To England</i>	<i>13.4.18</i>	<i>B. 213</i>
		<i>Posted to General Depot</i>	<i>England</i>	<i>21.4.18</i>	<i>E. 7343.</i>
		<i>Home life</i>	<i>To Australia</i>		<i>D. 3083-5732.</i>
					<i>PTU O. 14.4/15/18.</i>
					<i>Whogay Major</i>
					<i>for enlisted. Aals.</i>
					<i>Edw Sect. 3rd Echelon C.A.G.</i>

(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, Shoeing-Smith, &c.

726118

Mc Eachern

A. L.

Report		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.
Date	From whom received				
31.5.18	Genl Depot	YOS from 4 th Can Lt In Bty	Secliffe	23.4.18	DD 129 ✓
					Lieut. for Colonel i/e Records <i>on R</i>
1.8.18	Do	Ceas hosp. up 1 st CCB	Do	29.7.18	Do 181. 1.8.18.
10.8.18	Do	Ceas com. up 1 st CCB	Do	9.8.18	✓ 189. 10.8.18.
12.8.18	Do	CO 6 th Res Bn. Seaford.	Do	9.8.18	✓ 190. 12.8.18 Loye Recd
					For O.C. Can. General Depot
12.8.18	OC 6 th Res	YOS 6 th Res on transfer from Shoncliffe Gen Depot	Seaford	9.8.18	P+E B.O. 189 ✓
					SEAFOORD. 4 SEP 1918. DIST II No 210 <i>P.T.</i>
					<i>Geo H. Hasler</i> OFFICER i/e RECORDS 6th CAN. RES. BN.
	C.O. B.D	Arrived & Taken on Strength 21st Canadian Battalion.	C.O. B.D.	5 SEP 1918	Part II Ord. 69 112-9-18
	G.I.B.D.	Left for C.C. Rein. C.	Field	9-9-18	NR
	C.C. Rein. C.	Arrived. Can. Corps Rein. Camp.	Field	9-9-18	NR
	Do	Left for Unit	Field	10-9-18	NR
14/9	21st BATTALION	Arrived	Field	11-9-18	B-213

CERTIFIED
 SEP 1918
 W. H. HARRIS, O.D.M.

U.C. 6th Can. Res. Bn.

DRAFTED

TO 21st Bn

SEAFOORD. 4 SEP 1918

DIST II No 210

Casualty Form - Active Service.

Regiment or Corps 21st Canadian Battalion

Rank Pte Surname McEachern Christian Name Archie Lochie

Religion Age on Enlistment years months

Enlisted (a) Terms of Service (a) Service reckons from (a)

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

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

Occupation Signature of Officer

Report		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
Date	From whom received				
		Embarked ... G.S.W. Forearm L. Disembarked... Invalided <u>Wounded</u> Posted to Eastern Ontario Regtl. Depot, Seaford.	England	15/10/18	W.3083-6256 Part II Ord. 86 23/10/18
	18. Genl "Princess Elizabeth"				
		<u>Whogau</u>	Major for Lt.-Col., A.I.G. Canadian Section, G. H. O. 3rd Echelon B.E.F.		
29. 10. 18.	C.O.R.D.	posted from 21st Bn of Seaford	Seaford	15/10/18	Q/50270

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) Signaller, Shoeing-Smith, & Co. (17591.) Wt. W 1887-P 1124. 1,000,000. 6/18. D & S. Form B/103, (E. 1256.)

Report		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
Date	From whom received				
26-4-19	M.D.3.	T.O.S. #3 D.D.	Kingston	30-4-19	HQ. 119.
5-6-19.	Sd A. #3	DD R.8. 1450. +HQ-156.			

Robert
Lieutenant
For O. C. 3 District Depot.

726118.

D. Coy. Kirkfield.

DUPLICATE MEDICAL HISTORY SHEET. DUPLICATE

Surname McEachern Christian Name Archy Lochie

Examined { on 10th day of February 1916.
at Lindsay
Birthplace { City or Town St. Ursula
County Ontario

Approved by J. McCulloch Capt.
J. McCulloch Medical Officer
Rank 109th Overseas Battalion, C.M.F.

Apparent age 32 years
Trade or occupation laborer
Height 5 Feet 10 1/2 Inches.
Weight 134 Lbs.
Chest measurement { Minimum 34 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 None Left Two
Number Two

Date	Result	VACCINATIONS,
<u>10-2-16</u>	<u>fit</u>	<u>J. McCulloch</u> M.O.
<u>12-3-16</u>	<u>fit</u>	<u>J. McCulloch</u> M.O.
		M.O.

When Vaccinated last Feb. 10th 1916
(a) Marks indicating congenital peculiarities or previous disease None

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>12/6/16</u>	<u>fit</u>	<u>J. McCulloch</u> M.O.
<u>20/6/16</u>	<u>"</u>	<u>J. McCulloch</u> M.O.
<u>24/6/16</u>	<u>"</u>	<u>J. McCulloch</u> M.O.
<u>22-9-16</u>	<u>"</u>	<u>J. McCulloch</u> M.O.

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

Enlisted on 10th day of February 1916 at Lindsay
TAB June 1917 TAB. R. 6-421 18.

	CORPS.	REG'L NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Bn. C.M.F.</u>	<u>726118</u>		<u>9-2-16</u>
Transferred to.....		<u>D.</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

McEachern

Christian Name

John Leslie

1002

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				
BWMA Kingston		26	4	19	30	5	19	g SW Lt Arm Injury Med man	34	Bronched 26-5-19 Med Manfit	Stewart Capt. A.M.C.

726148
MAY 1918

ORIGINAL MEDICAL HISTORY SHEET.

D. Corp. Markfield

24 OCT 1918

ORIGINAL

Surname McEachern

Christian Name Archy John

Examined on 10th day of February 1916
at Sunday
Birthplace { City or Town Lap. Ontario
County Ontario

Approved by J. McCulloch Capt.
J. McCulloch Medical Officer
Rank 109th Overseas Battalion, C. I. P.

Apparent age 32 years
Trade or occupation Laborer
Height 5 Feet 10 1/2 Inches
Weight 134 Lbs.
Chest measurement { Minimum 34 inches
Maximum expansion 38 inches
Physical development Good
Small-Pox Marks None
Vaccination Marks { Arm Right None Left Two
Number Two

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		<u>26 APR 1918</u>
<u>18718</u>	<u>A</u>	<u>J. McCulloch</u> M.O. <u>21 OCT 1918</u> M.O. <u>can.</u>
		M.O.
		M.O.
		M.O.
		M.O.

When Vaccinated last Feb. 10th 1916
(a) Marks indicating congenital peculiarities or previous disease None

Date	Result	VACCINATIONS
<u>10-2-16</u>	<u>Nil</u>	<u>J. McCulloch</u> M.O.
<u>13-3-16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
		M.O.

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

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>12.6.16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>20.6.16</u>	<u>"</u>	<u>J. McCulloch</u> M.O.
<u>26.6.16</u>	<u>"</u>	<u>J. McCulloch</u> M.O.
<u>TAB 22-9-16</u>	<u>"</u>	<u>W. Boyd</u> M.O.

Enlisted on 10th day of February 1916 at Sunday

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Bn. C.E.F.</u>	<u>726118</u>		<u>9.2.16</u>
Transferred to.. ..	<u>21st Bn</u>	<u>D.</u>		
	<u>21st Bn</u>			<u>4 SEP 1918</u>

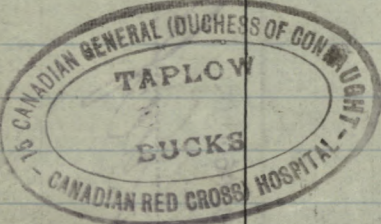
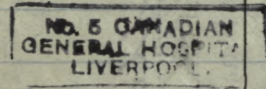
EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Tappan</u>	<u>Feb 5 1919</u>	<u>Adherent scar to forearm with lesion of Median nerve</u>	<u>Discharged Invalid Resident</u>

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.

CANADIAN

Surname *McEacran* Christian Name *Wesley Leslie*

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				
NORFOLK WAR HOSPITAL THORPE, NORWICH.		22	4	18	10	5	18	LSW foot	18	Flesh Trans to M Co Hsp Epsom	<i>G. Symon</i> MAJOR. FOR LT. COL., R.A.M.C., OFFICER IN CHARGE.
M.C.H. Epsom.		10	5	18	29	JUL	1918	do.	81	c.o.a. Wound healed & well no disability. Has had n.d. R.G. and P.T. here. Improved Now fit for A. 20th 11.5.18	<i>T. P. Heenan</i> Capt. CANIC
NORFOLK WAR HOSPITAL THORPE, NORFOLK		15	10	18	6	1	19	ESW Wrist	84	Severe Septic Wound healing Trans to 15 Cav Genl Hsp Taplows	<i>G. Symon</i>
					6	JAN	1919	ESW Forearm Trans Wlna	68	Wounds healed, union firm. To C. G. H. Kirkdale	<i>T. S. Tupper</i> OFFICER IN CHARGE.
					14	MAR	1919	do		Wound healed. Septic Pleuro-adhesions	<i>T. S. Tupper</i> Capt. T. S. Tupper R.A.M.C.
"ARAGUAYA."		14	4	1925	4	19		do	100	do	

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 726118 (Rank) Private

Name (in full) McEACHERN, Archie Lochie. enlisted in
the 109th Overseas Battalion
CANADIAN EXPEDITIONARY FORCE at Lindsay, Ont. on the 10th
day of February 1916.

HE served in Canada, England and France.
and is now discharged from the service by reason of being medically unfit for further
War Service. Authority Med. Board D/27-5-19 R.O. 1420

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:—

Age <u>35 yrs. 11 months.</u>	Marks or Scars <u>Wound scars on left forearm.</u>
Height <u>5 ft. 10½ ins.</u>	<u>1</u>
Complexion <u>Fair</u>	
Eyes <u>Blue</u>	
Hair <u>Fair</u>	

A. McEachern
Signature of Soldier

R. H. Page 1st Lt.
for O. C. Discharge Section
No. 3 District Depot
Rank

Date of Discharge 5-6-19

Appointment

Signed at Kingston, Ont. this 5th day of June 1919

in Military District No. 3

File Reference No. 3DD-3-Mc-543

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

War Service Badge Class *A. B.*

No. *278810* *65.730* Issued

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. _____ (Rank) _____ Name _____

Unit _____

Address on Discharge _____

Character and Conduct _____

Former Occupation _____

Special Qualifications of Value in Civil Life _____

Medals and Decorations _____

Remarks _____

Signed at _____ this _____ day of _____ 19 _____

Name of Officer

Rank

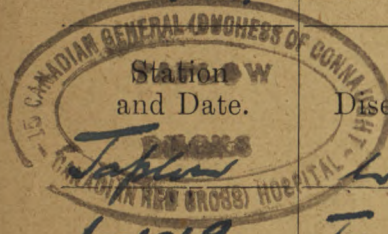
Appointment

- 1.—That discharge certificate must be carried when wearing uniform.
- 2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing, and
- 3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.

On demobilization the particulars called for on the back of this certificate will not be completed.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
11385	726118	Pt	McEachern	A.
Year.	21 st Can	Unit.	Age.	Service.
1919			40	3 yrs.
Station and Date.	Disease G.S. W. Forearm R. Fract. ulna.			
6-1-19	Wounded Oct 12 th 1918 at Cambrai			
	In 9 th Can F.S. In 15 th Gen. Hosp. 14/10/18			
	Commin. fract. ulna, R. 3 1/2 in. Unsol during. No operation.			
	A.T.S. 750 12-10-18			
	On admission Taphew wounds were healed and union of fractured ulna was firm.			
	There is a T-shaped scar on flexor surface of left forearm about 5" above wrist. Scar is adherent to underlying tendons. Small scar on outer margin of forearm, ^{at ant. edge of} at ant. edge of ulna. Both scars are firm and not tender. There is loss of motion over front & back of distal phalanges of index & middle fingers. Two radial fingers cannot be completely extended at the phalangeal joints. Fusion at phalangeal joints of all the fingers is limited. Some wasting of thenar muscles.			
	For Massage.			
5-2-19	For Invaliding to Canada of Baynes			
14-3-19	To: - No. 5 Can Gen. Hosp, Hurkdale L'pool			
Hurkdale	Wounds healed. Slight flexor			
17-3-19	adhesions			
	W. S. Stephens Capt L'pool			



* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.
(A 1014) W3081/P/1296 3,460m 7/18 Drayton Mill Forms/I. 1237/14 (E. 3420) [P.T.O.]

Station
and Date.

QUEEN'S UNIVERSITY MILITARY HOSPITAL.

May 15th. 1919.

Name- McEachron A.M. Pte. #7 26118 21st Batt.

Disability- G.S.W. Forearm Lt.
The wound of entrance is represented by a small circular scar on the inner side of the forearm $2\frac{1}{2}$ " above the wrist joint. The wound of exit is represented by a scar 1" long on the volar aspect of the forearm $2\frac{1}{2}$ " above the wrist joint.

Movements -
Shoulder-- normal.
Elbow-- normal.
Wrist-- Flexion - 110%.
 Extension- 210.
Fingers-- Flexion- of 3rd & 4th fingers -- normal.
 of 1st & 2nd fingers- 80%.
 Extension- normal.
Thumb----- All movements normal except opposition which is absent.

Cutaneous Sensibility -

Epicritic-
1. Anaesthesia on dorsal aspect of 2 distal phalanges of 1st & 2nd fingers.
2. Anaesthesia on palmar aspect of 1st & 2nd fingers.
3. Hypoaesthesia on palmar aspect of hand opposite the 2nd & 3rd metacarpals.
Protopathic-
1. Corresponds to "epicritic."
2. " " " "
3. Hyperaesthesia on palmar aspect of hand opposite the 2nd & 3rd metacarpals.

Electrical Responses -

Faradism-
1. Extensor Group normal response.
2. Flexor Group (Ulnar) normal response.
3. Flexor Group (Median) no response.
Galvanism-
1. Extensor Group K.C.C. greater than A.C.C.
2. Flexor Group (Ulnar) K.C.C. greater than A.C.C.
3. Flexor Group (Median) sluggish response A.C.C. / Greater than K.C.C.

Diagnosis -

A.C.C. equals K.C.C.
Lesion of Median of forearm.

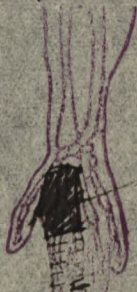
Epicritic
+
Protopathic
Dorsal



anaesthesia

Epicritic

Palmar



anaesthesia

J.P. [Signature]

Major C.A.M.C.

Protopathic
Palmar



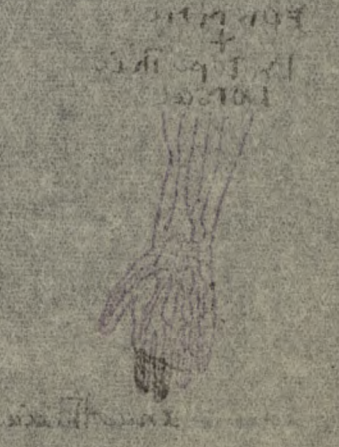
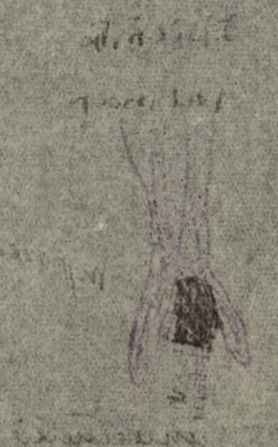
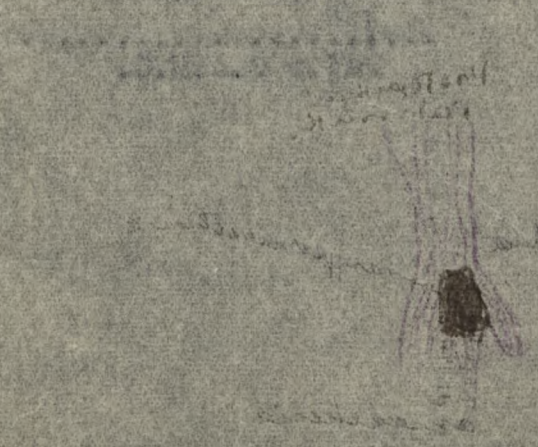
anaesthesia

hypoaesthesia

hyperaesthesia

THE HISTORY OF THE

[The following text is extremely faint and illegible due to the quality of the scan. It appears to be a list or a series of entries.]



MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year 1918.	726118	Plt	McEachern.	A. L.
		Unit.	Age.	Service.
		C. I. A.	41.	
Station and Date.	Disease G. S. H. Rt. Foot. Fibula.			
11.5.18.	G. S. H. Rt. Foot. Healed and no disability.			
	No Duty.			
	T-AB 2			
	cap 11.5.18 2			
18.7.18.	A	H. L. L. L. L. Capt. C.A.M.C.		

Convalescent Hospital,
 Woodcote Park, Epsom.

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Station
and Date.

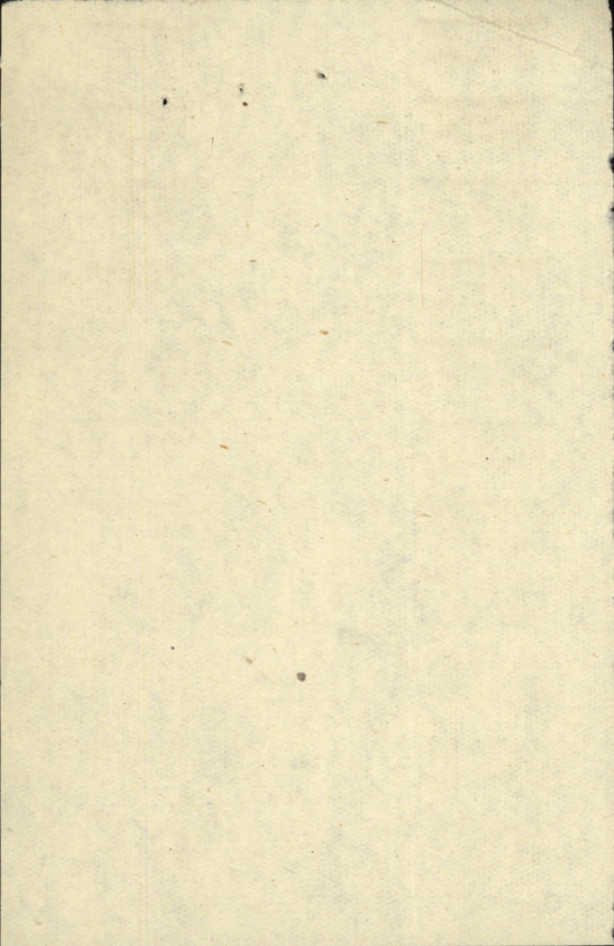
1
G. S. W.

Fracture

Severe

Upper Extrem.

Ulna



CASE HISTORY SHEET

Q.U.M.H.

Hospital.

Kingston,

Station.

No. 726118 Rank Pte. Name McEachern Archie Age 40

Unit #3 D.D. Completed years of service ^{Where and how long} 3 years 2 months.

Date of admission April 19/19. Date of discharge May 30/19.

Diagnosis G.S.W. left forearm Place of origin Cambrai.

CONDITION ON ADMISSION AND PROGRESS OF CASE. Man complains of weakness left arm with partial loss of movements of left wrist & fingers. Objective: Neurological report attached. Grip of hand about 40% normal. X Ray shows: - Old fracture of the ulna at the junction of the lower & middle thirds. The union & position are good.

FAMILY HISTORY. Negative.

(Tuberculosis, mental or nervous diseases.)

TREATMENT. Massage, electricity gymnastics, exercises. Neurological test.

(Especially any specific or special form.)

CONDITION ON DISCHARGE. Fit for discharge from hospital.

(and disposal made of case.)

Date May 30/19.

J. S. Stevens Capt. A.M.C.
Medical Officer i/c case.

Name: _____ Rank: _____
 Hospital: _____
 Date of admission: _____
 Date of discharge: _____
 Place of origin: _____
 Completed years of service: _____
 When and how long: _____

Location of Ambulance and Progress of Case: _____

Date: _____
 Medical Officer in Charge: _____

1.2.16

MILITIA AND DEFENCE

M. F. W. 11.
50m.—4-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Elizabeth McEachernName of Soldier McEachern, Archie L.Address Kirkfield

Regtl. No.

Box 24 OutRank PteCorps 109 Bu

Relation to Soldier

To what Corps belonging

wife, child or mother

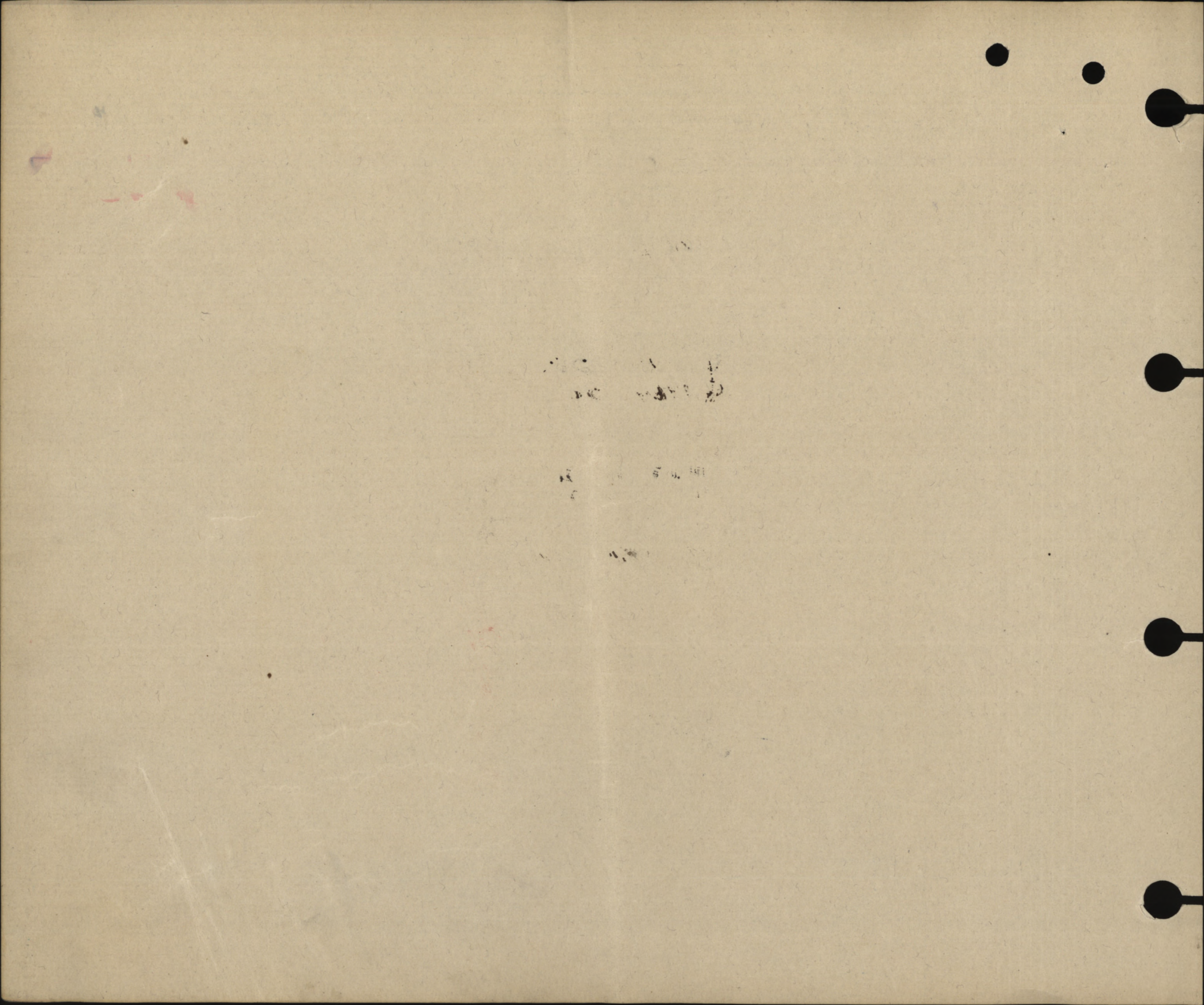
wife

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			
Feb.				
March				





SEPARATION ALLOWANCE

Sheet No. 2.

Elizabeth McEachern (wife)
OVERSEAS CONTINGENTS
PAYMENTS.

Name of Soldier

McEachern, Archie L.
Phe

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

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May		J3229	60	60
June		K3558	20	20
July		N10718	20	20
Aug.		L14279	20	20
Sept.		Y16815	20	20
Oct.		Q19648	20	20
Nov.		X23419	20	20
Dec.		K26406	20	20
Jan.	1917	H29537	20	20
Feb.		H32632	20	20
March		H35772	20	20
April		H2080	20	20
May		J5256	20	20
June		I8513	20	20
July		I11675	20	20
Aug.		Q15767	20	20
Sept.		Y18854	20	20
Oct.		D22930	20	20
Nov.		N24173	20	20
Dec.		S26743	20	20
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

440

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	1920			
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.				
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H. Q. 1772-39-819

To Whom *Mrs Eliz M Eachern*

Address

*Kirkfield
Ont.
Box 24*

By Whom Assigned

A. L. M. Eachern

Regtl. No.

726118

Rank

Pte

Corps

109th Btn

Rate

15⁰⁰

1 Aug 16

2.7m. 8⁹/₁₆ M.H.R. 27⁷/₁₆

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



Handwritten notes in the center of the page, including the number "882" and other illegible markings.

ASSIGNED PAY

OVERSEAS CONTINGENTS

Mrs
Elij. McEachern

Name of Soldier

Pte A. L. McEachern
726118 — 109th Battalion

Sheet No. 2.

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

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
				15 ⁰⁰ 1-8-16
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		024160	45	to exp
Nov.		N 29391	15	
Dec.		X 33148	15	
Jan.	1917	Ch 440248	15	
Feb.		445737	15	
March		051405	15	15 ⁰⁰
April		N 3288	15	15-13
May		N 9430	15	15 ⁰⁰
June		N 18609	15	Mc
July		N 23548	15	B.
Aug.		Y 29808	15	
Sept.		U 36501	15	B
Oct.		B 43434	15	E 43434 Remailed 19 ¹⁷ B.L.
Nov.		W 49249	15	
Dec.		M 60488	15	255
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			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

P. 559
MARRIED OR SINGLE

Married

PLACE OF BIRTH

Dwp. Verulam Ont

NAME AND ADDRESS OF NEXT OF KIN

Elizabeth McEachern

Kirkfield Ont Can

Wife

RELATIONSHIP OF NEXT OF KIN

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.

Table with columns: PARTICULARS, EFFECTIVE DATE, AUTHORITY, ADMISSIONS TO HOSPITAL, &c. (DATE ADMITTED, DATE DISCHARGED, V. OR A., NAME OF HOSPITAL)

REG'L No. 726118 RANK

Pte NAME McEachern Archie Lochie

IF IN PERM. CORPS
WHAT UNIT

UNIT 109th Bn TRANSFERRED TO 21st Bn DATE 6/10/16 AUTHORITY 50279

PERMANENT FORCE ALLOWANCES

TRANSFERRED TO 1st Can Light Inf. Bty DATE 1/1/18 AUTHORITY 1

PLACE OF ATTESTATION

Lindsay Ont TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION

Feb 10th/1916 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$ 15⁰⁰/100 DATE EFFECTIVE

Aug 1st 1916

PAYABLE TO

Elizabeth McEachern RELATIONSHIP Wife

ASSIGNED PAY MONTHLY \$

DATE EFFECTIVE Kirkfield Ont

PAYABLE TO

RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE)

EFFECTIVE

REASON

DISCHARGE DATE AND PLACE

REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

Checked McEachern

Main ledger table with columns: 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

68

50279 Transferred to 21st Bn 6/10/16

* Strike out whichever inapplicable.

ASSIGNED PAY. ENGLAND or CANADA. SEPARATION ALLOWANCE. ENGLAND or CANADA.

NAME:- **M^c EACHERN Archie Lochie**
NUMBER:- **726118**

EFFECTIVE DATE:- **1.8.16**
AMOUNT:- **15.00**

PARTICULARS OF RANK OR APPOINTMENT

NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

AUTHORITY DATE EFFECTIVE RANK OR APPOINTMENT

*Mrs. Eliz. McEachern. Wife.
Kirkfield Ont.*

Private

*Canadian Patriotic Fund, Lindsay, Ont.
(Trans 1/12/18 in trust for wife & children, also S.A.)*

UNIT AND TRANSFERS

Stopped off 1/4/19.

ORIGINAL UNIT:- **109th Bn.**
DATE ACCOUNT FIRST OPENED:- **1.8.16**

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

AUTHORITY DATE EFFECTIVE DATE LEDGER SHEET T S P D UNIT TRANSFERRED TO

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
3/3/19	6084	Daplow 20/3	4.87	11/2/19	S.F.	12/19	8.96
12.5.18	4678		9.73				

189 12/8/18 1.9.18 20.9.18
4th C.L.T.M. Bn.
6 Res Bn.
Canada Sec

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1		10	

130.73
130.73

PARTICULARS OF RENDERING NON-EFFECTIVE: *Invalidated to ban. off 1/4/19 with Dep. A-12. Daplow 17/3/19 Daplow M.D. 2.4.19. 121.77*

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
Mar 31	Bal. Ford.								37.48	✓	
April	P.P.	33		A. Pay.				15	51.02	✓	
		33		AR. 58-20 Bn. 11.4.18.	4.46			15			
May	P.P.	34.10		A. Pay.				15	55.52	✓	
		34.10		AR. 4678 - Epson M. 13.5.18.	9.73						
				Hop. Res. AR. 5343 - 2.5.18.	4.87				73.52	✓	
June	P.P.	33		A. Pay.				15	68.65	✓	
		33		AR. 4065 - Epson M. 13.6.18.	4.87			15			
July	P.P.	34.10		A. Pay.				15	63.42	✓	
				C.D. 20082 - 31.7.18.	24.33				39.09	✓	
		34.10		AR. 5562 - Epson M. 29.7.18.	24.33			15			
Aug		34.10		A. Pay.				15	58.19	✓	
				D.A.R. 3684 6 Res Bn. 28.8.18.	2.43				50.89	✓	
				... 3098 ... 15.8.18	4.87						
Sept.	P.P.	34.10		ban. A.P.	7.30			15	60.45		
		33		AR. 3932. 3/9/18 6 Res	4.87			15			
				Small. 1235 2/19/18 16 Res	3.57				74.68		
		33		ban. P.P.	8.44			15			
Oct	✓	34.10		R47155 26/10/18 Hop	4.87			15			
		34.10		R58987 7/12	4.87			15			
				Nov & Dec.				30			
Nov & Dec	P.P.	10/20		Jan.				15	126.01		
		10/20			4.87			45			

NUMBER 72118

RANK Pte

NAME McKechnie A.L.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Feb	Feb PP	3080		4242 6/1 15 6/18	487				12601		
	16-2-19-28/21/9/20 54 6/3/19 EOR	876		5076 10/2 ✓	2433						
				4921 6/2 ✓	487	3467					
Mar	PP	3410		AR Feb + Mar				30			
				21954 18/2 21/12 21/12	578						
				6084 3/3 Cam 8.15 6/18	487				12495		
		7366		7684 5/2 5/2 (End)	4472			30			
				1505 25/3 19967 ✓	487				11521		
				7472	974						
				12495							

S.O. 86mav 1/4 500 EOR

Wafarab
12/3/19

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

M

OVERSEAS CONTINGENTS

1.3.16

4157 Aug. 11/1916

RATE OF SEPARATION ALLOWANCE

20	\$25.00	30 1/8
	1 12 17	
	P.C. 3257	P.B. 2753. M.O. 35150

RATE OF ASSIGNMENT

15			
----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 726118
 Rank Pte - Promoted Reverted Discharge
 Soldier's Name A. L. McEachern
 Battalion 109th Batt
 Beneficiary Elizabeth McEachern
 Relationship Wife
 Address Can Pat Fund Lindsay Ont. *Effective 1 12/18*

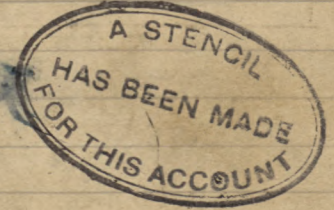
PARTICULARS OF ASSIGNMENT

County of Victoria Br. ¹⁻¹²⁻¹⁸ ~~Canada~~ Pat. Fund.
 Name Mrs. Eliz. McEachern
 Address Kirkfield, Ont.
Box 27 Change of Address
 1 *112 Mainman St.
 2 North Lindsay Ont
 3 In Trust for wife & children.
 4
Susp 24 1/18

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917					
DEC. 31		440	255	695	<i>M.F. W. 12554</i>
Jan 1918	K 65820	30	15	45	<i>Alteration L H 1284 23 8/18</i>
Feb.	T 74945	25	15	40	<i>MRO. 49030 To Suspends 6 12/18 File 012301-a-3</i>
Mar.	L 94612	25	15	40	<i>Sa & al suspended 30-11-18.</i>
Apr.	E 2283	25	15	40	<i>Auty P.A.B. File 012301-a-3.</i>
May	N 17173	25	15	40	<i>Sa Reopened from date suspended.</i>
June	J 21713	25	15	40	<i>Auty P.A.B. Ruling on file</i>
July	L 28428	25	15	40	<i>0.3094 Mailed 4-1-19.</i>
Aug.	L 39113	25	15	40	<i>W.M.O. h.P. 80013 to Dec 2 5/19</i>
Sept.	Q 113916	25	15	40	<i>* Env. sent 14 8/18</i>
Oct	T 51206	25	15	40	
Nov	P 56671	25	15	40	
Dec	K 66547	45	15	60	
19 Jan	O 3094	45	15	60	<i>0.00 L H 15654</i>
Jan	S 73139	30	15	45	
Feb.	Q 77876	30	15	45	
Mar	J 90601	30	15	45	
Apr	L 2753	30	15	45	
		885	495	1380	

M. F. W. 128
 400M. - 6-17-1772-38-1141
 L. L. 25220 - M. & D. 7883.

A/c Closed 30-4-19
 Ret'd per Arguaya
 Date 25/19 M.F.W. 187
 Clerk AR Duper



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. _____

Rank Promoted Reverted Discharge

Soldier's Name _____

Battalion _____

Beneficiary _____

Relationship _____

Address _____

Name _____

Address _____

Change of Address _____

1 _____

2 _____

3 _____

4 _____

	Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS

"Annapaya"
25-4-19

AUDITOR *CHB* PAYMASTER *S*

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES

M. OR S. _____ REGT. NO. *726118* RANK *Plg.* NAME (IN FULL) *M. E. ASHERN* BLOCK LETTERS SURNAME FIRST

NEXT OF KIN *County of Victoria Branch, Patriotic Fund, Lindsay, Ont.* RELATIONSHIP *In Trust for wife and children*

ADDRESS *County of Victoria Branch, Patriotic Fund, Lindsay, Ont.* ORIGINAL UNIT C.E.F. *109th Bn.* PLACE OF ATTESTATION *France* TRANSFERRED TO _____ DATE _____ AUTHORITY _____

IS SEPARATION ALLOWANCE PAID? *Yes* DATE EFFECTIVE *1-5-19* RELATIONSHIP *Plt. A.L. McEachern* ANY CHANGE IN ASSIGNEE OR ADDRESS _____

TO WHOM PAID *Same as above.* ADDRESS *Canadian Patriotic Fund, Lindsay, Ont.* PAYABLE TO *15.50* DATE EFFECTIVE *1-5-19*

STOP PAYMENT FORM RENDERED, DATE _____

DISCHARGED _____ PLACE _____ DATE *5-6-19* REASON *S-M-543* AUTHORITY _____ IF ENTITLED TO POST DISCHARGE PAY *Yes*

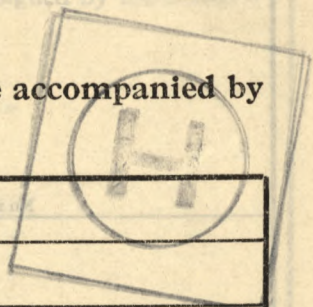
MONTH	PAY AND F.A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGIMENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS	
	NO. OF DAYS	RATE	AMOUNT				COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3						DEBIT	CREDIT		DEBIT
					130.73	130.73													130.73		
March																					
April	30	1 ¹⁰	33 00			33 00				9 74	5 00	50 00	15 00					79 74		50 99	
May	31	"	34 10	12 00	30 -	76 10				9 59		19 10	48 00					160 09		83 99	00120 Subs 15 dys.
June	5	"	5 50	35 -	45 -	45 50				40 50			5 -					45 50			23524 ✓ 272629 ✓ 22993 ✓
						285 33												285 33			272750 ✓ 272751 ✓
War Service Gratuity																					
																					MFW 2595 Rec
183 days mis					42000	18000	60000			940838-9								70 -	30 -	100 -	272750 ✓ 272751 ✓
July										960498-9								70 ✓	30 ✓	200 ✓	280 ✓
										1305989-90								70 ✓	30 ✓	300 ✓	210 ✓
										1320702-4								70 ✓	30 ✓	400 ✓	140 ✓
										1321453-4								70 ✓	30 ✓	500 ✓	70 ✓
																		70 ✓	30 ✓	600 ✓	- ✓

This space to be for numbers

Proceedings on Discharge.

581

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page).



No. 726118	
Rank Private	
Surname McEACHERN.	
Christian Name Archie Lockie.	
<small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company) No. 3 District Depot	
Date of Discharge 5-6-19	
Place of Discharge Kingston, Ont.	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age 35 years 11 months.	Descriptive Marks Wound scarson left forearm
Height 5 feet 10 1/2 inches.	
Complexion Fair	<p style="color: red; font-size: 2em; font-weight: bold; transform: rotate(-15deg);">Deceased 14-11-52</p>
Eyes Blue	
Hair Fair	
Trade Labourer.	
Intended place of residence Lindsay, Ont.	
<small>(To be given as fully as practicable.)</small>	
2. The above-named man is discharged in consequence of being medically unfit for further War Service.	
Authority Med. Board D/ 27-5-19 R.O. 1420	
<small>N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.</small>	
To be in the hand writing of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.	3. Conduct and character while in the service have been, according to the records, etc.
	N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.
	4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

M. F. B. 218.
100M.-1-17.
H. Q. 1772-39-113.

ZP

Medical Documents
 Forwarded to
~~S.C.R.~~ or B.P.C.
 on
 Date..... JUN 27 1919

R.C. 14
19-2-200-20
(OVER)

27-3-53
AS

5. He is in possession of the following number of G. C. Badges:

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (Squadron or Battery), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place).....

(Date).....

Commanding

8. Certificate to be signed by the Soldier on Discharge

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place)..... Kingston, Ont. x A. J. C. Caisher (Signature of Soldier.)

(Date)..... 5-6-19 Edward A. J. Caisher (Signature of Witness.)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

..... (Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to..... (the date to which the Record of Service is completed).....years.....days.

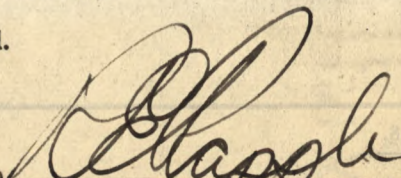
Total.....years.....days.

11. Confirmation of Discharge.

The discharge of the above-named man is hereby confirmed.

(Place)..... Kingston, Ont.

(Date)..... 5-6-19

(Signature)  Lieut. for O. C. Discharge Section No. 3 District Depot.

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

A. J. McCahey

<p>Militia Form B. 332 Attestation Paper</p>	<p>Reg. Conduct Sheet Militia form B. 303</p>
<p>Proceedings on Discharge B. 318</p> <p>(a) Proceedings on Discharge (b) Attestation (c) Medical History Sheet (in the event of such having been prepared)</p>	<p>Company Battery Regiment B. 263a Conduct Sheet</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet Militia Form B. 313</p> <p>Medical Report for Invalids* " " B. 327</p> <p>Statement of Man's Account on Transfer and Last Pay Certificate " " D. 877</p> <p>Only if discharged "Medically unfit"</p>

N.B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of purchase money is to be noted hereon.

Reservations referred to at Para. 8.
(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263.</p> <p>Squadron } Battery } Conduct Sheet, " B. 263a. Company }</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia Form B. 313</p> <p>Medical Report for Invalid* " B. 227.</p> <p>Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.</p> <p>*Only if discharged "Medically unfit."</p>	<p>Attestation Paper, Militia Form B. 235.</p> <p>Proceedings on Discharge " B. 218.</p> <hr/> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p style="padding-left: 40px;">(a) Proceedings on Discharge.</p> <p style="padding-left: 40px;">(b) Attestation.</p> <p style="padding-left: 40px;">(c) Medical History Sheet (in the event of such having been prepared.)</p>
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N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

REGT'L NO 726118

NAME McEachern Archie L Ohio

H. Q. FILE NO. 649-

RANK AND CORPS Pvt 21st Cav. 21st Bn. (form

FOLLOWS	th. B.M.
NO.	<u>F. M. B. Y.</u>
FOLLOWS	

CABLE		NATURE OF CASUALTY
No.	DATE	
		"C"
	A. D. H.	Mrs Elizabeth McEachern (wife)
		118 Wainman St. North 118 Wainman St. North 118 Wainman St. North
1-2	2-6-18	adm. woodcote Park, Cono. Hosp. Epsom, May 11th. 1918 lvs w R foot.
2-8	20-10-18	Adms. 18. Gen. H. Dannes.
also 24 L.	2349 ⁽²⁾	Comms. Det. 13/18. J.W. S. Conn

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A 449	No 18 Gen. Danner Camiers	16-2-17	Influenza sllt.
A 450	No 20 Gen. " " "	17-2-17	Influenza & Scabies sllt.
A. 458	6 Conv. Depot Etaples	1-3-17	Influenza & Scabies
A. 463	Discharged to Details Camp.	6-3-17	" " "
a 5-75	Rept from Base to Fld. Amb.	13-7-17	Sick
Q 557.	" To Fld Amb.	24-7-17.	Sick
Q 172-1	No. 4 Can. Fld. Amb.	13-3-18	Pleurisy (Misc. Units.)
Q 181-1	No. 12 " " "	27-3-18	"
Q 182-1	No. 11 " " "	29-3-18	Corneal Ulcer P.
a 226.	Discharged	1-4-18	" " "
a 226	1 Aust. Gen. Rouen	13-4-18	S. W. Rt. toe
B 26-1	Norfolk. War. Hospital	22-4-18	S. W. Rt. Toe.
B 26 (")	Mil. Conv. Lidete. Plk Epsom	18	S. W. Rt. Toe.
B 81.	else.	29-7-18	Grewt. toe.

NAME *M^a Eachern A. L.* REGT. NO. *726118*

RANK AND UNIT *Pte.* *East. Out Reg't*

NEXT OF KIN

CABLE

No.

DATE

NATURE OF CASUALTY

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

B 352¹¹Norfolk War Hospital
Norwich

15-10-18

G.W. L. Arm
E.O.P.

B 413

15⁶⁴ Can. Gen. Hospital
Daplow

7-1-19.

G.W. L. Wrist

B 473.

5 Can. Gen. Hospital
Kirkdale

10-3-19

" " "
G.W. L. Wrist

B 496

Invalided to Canada

14-4-19

G.W. L. Wrist
L 500 M.D.F.

THIS FORM WILL BE USED FOR ALL RANKS
MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION..... Kington Ont...... DATE..... May 27th 1919

1. 1 (a) Unit..... 3 D.D...... (b) Regimental No..... 726118..... (c) Rank..... Pte.
 (d) Surname..... McEACHREN..... (e) Christian name..... Archie
 (f) Home address..... Lindsay Ont.
 (g) Next of Kin..... Mrs. A. McEachren..... (h) Relationship..... Wife
 (i) Address of Next of Kin..... Lindsay Ont.

2. Age last birthday..... 40..... Date of birth..... July 13th 1878

3. Enlistment, or Appointment (if an Officer) (a) Place..... Lindsay..... (b) Date..... Feb. 10/16

4. Personal description:
 (a) Height..... 5'10 1/2"..... (b) Weight..... 146..... (c) Complexion..... Fair
 (d) Colour of hair..... Fair..... (e) Colour of eyes..... blue..... (f) Identification marks, Scars, etc..... Scars on left forearm

5. Former trade or occupation..... Farmer

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	<u>3 years</u>	<u>3 mos.</u>

	PERIODS	
	From	To
Canada..... <u>109th Bn.</u>	<u>Feb. 10/16</u>	<u>July 1916</u>
England..... <u>21st Bn.</u>	<u>Jly. 1916</u>	<u>Oct. 1916</u>
France or other theatres of War..... <u>21st Bn.</u>	<u>Oct. 1916</u>	<u>Apr. 1919</u>
<u>3 D.D.</u>	<u>Oct. 1916</u>	<u>Oct. 1918</u>
	<u>Apr. 1919</u>	<u>Date</u>

7. Original disease, or injury..... G.S.W. left forearm

(a) Date of origin..... Oct. 11/16..... (b) Place of origin..... Cambrai
 (c) Cause..... Bullet

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

Weakness left with partial loss of movement of left wrist & fingers.

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Subj. Men complains of weakness left arm with partial loss of movement of left wrist & fingers

Obj. See attached Neurological Report. Grip of hand about 40% normal

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above? (Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

- Nervous System..... No Cardio-Vascular System..... No Genito-Urinary System..... No
(If pulse rate is abnormal, B. P. will be taken.) (Albumen and Sugar will be excluded.)
- Special Senses..... No Respiratory System..... No Integumentary System..... No
- Disturbances of Mentality..... No Digestive System..... No Muscular System..... No
- Osseous and Joint Systems..... No Any other general condition..... No
See above

10. (a) History (of the condition referred to in Section 9 (a).)

Wounded Oct. 11/18 by bullet left forearm. Returned to Canada in April 1919.

10.—(b) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (a).)

Pneumonia about 20 years ago

(c) (Here give a description of wounds, scars and deformities.)

See No. 9

11.—(a) Did the disabling condition have its origin before enlistment? No

(b) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

N.A.

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment?

The regimental documents will be referred to.

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 6 mos. with re-exam.

14. Treatment (Case reports, general or special, should be secured and attached where possible.)

Eng. Mil. Hospital

U.S.A. since Apr. 1919

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? (If the answer is "yes" state nature of treatment required and probable duration)

No

16. Can the former trade or occupation be resumed? Yes with limitations (If not, briefly state why)

17. Recommendations..... That this man be discharged as medically unfit for service & with a pensionable disability

R. J. Tucker Capt. A.M.C.
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned..... have heard the description of my disability and present condition read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.)

I complain in addition of.....

X Archie M. O'Cashen Rank. Pfc
Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

YES

19. Is the invalid fit for

- (a) General service, (Category A) (Yes or No.)
- (b) Service abroad, not general service, (" B) (Yes or No.)
- (c) Home service (Canada only), (" C) (Yes or No.)
- (d) Temporarily unfit. (" D) (Yes or No.)
- (e) Unfit for service in Categories A, B and C (" E) (Yes or No.)

20. It is certified that the invalid

- (a) Does require treatment. (Give the nature of the condition and of the treatment required and its probable duration.)
- (b) Does not require treatment.
- (c) Should pass under his own control.
- (d) Should not pass under his own control. (Strike out condition not applicable.)

21. It is recommended that the invalid be discharged. (When not for discharge add special recommendation.)

as medically unfit with pensionable disability

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

Wm Gilbert Caplan President.
Dr. Asselstine Carl } Members
Dr. ... }

PLACE..... Kingston

DATE..... May 27/19

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned..... understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed..... Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

PLACE.....
 DATE.....
 President.
 Members

APPROVED BY *M. ...* Assistant Director of Medical Services.
 For A. D. M. S. Mil. District No. 3.
 DATE MAY 31 1919

APPROVED BY _____ Director-General of Medical Services.
 DATE.....

CERTIFICATE of MARRIAGE

I CERTIFY that I solemnized the marriage of:

Archie W. Gachem

and

Paul Eaton

at

Orillia

, ONTARIO,

on the

6th

day of

September

, 1921

in the presence of

Witness

Mary R. McKellinay

Address

Orillia

Witness

Myron L. McKellinay

Address

Orillia

Name

N. K. McKellinay

Address

Orillia

Denomination

Presbyterian

This Certificate may be given to the parties.

To the Contracting Parties

The VITAL STATISTICS ACT states that

“Where a child is born notice . . . shall be given to the Division Registrar of the Division in which the child was born by

- (a) the father, if living; or
- (b) in case of his inability, or if he is dead, by the mother, if living; or
- (c) in case of inability of both parents, or, if neither be living, by the person standing in the place of the parents.”

If in the future a Certificate of Marriage is required, the same may be obtained by applying to the Registrar General, Toronto.