

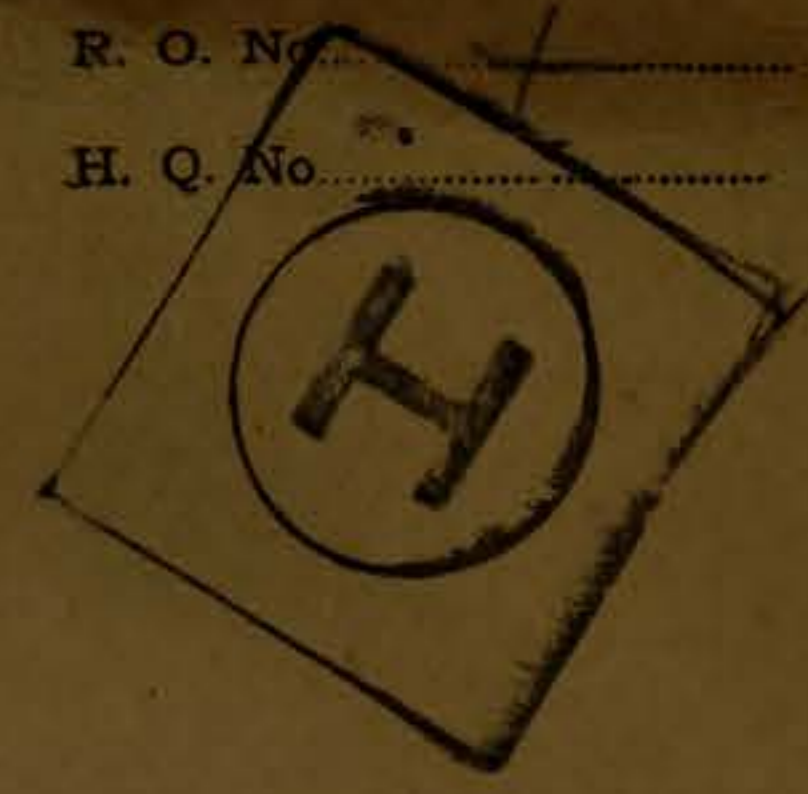
17m N. 16-5-18.

- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers.....
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet.....
- Compulsory Stoppages.....
- Casualty Forms.....
- Proceedings on discharge.....
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate.....
- Medical Report for Invalids.....
- Medical History Sheet.....
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet.....
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate.....

DISCLOSURE STATEMENTS

Name **Carmichael Henry**  
Regt. No. **17207** Rank **Plt.**  
Corps **7<sup>th</sup> Can. Bn.**

R. O. No. ....  
H. Q. No. ....



C7437

~~Rank,~~  
~~1st Lt. (Removed 15/1/18)~~  
~~Plt.~~  
~~Casualty.~~

Died of Wounds 24-4-15.



A.F.B. 122 — 1  
Card — 2

41 2.5  
10 25  
5 25  
2

Max. 19/20



# ATTESTATION PAPER.

No. 14207

Folio.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... *Hammond Henry*
2. In what Town, Township or Parish, and in what Country were you born?..... *Montreal City Que.*
3. What is the name of your next-of-kin?..... *Charles R. Hammond*
4. What is the address of your next-of-kin?..... *Rm. 22, 212 McGill St*
5. What is the date of your birth?..... *Nov. 25, 1888*
6. What is your Trade or Calling?..... *Chemist*
7. Are you married?..... *No*
8. Are you willing to be vaccinated or re-vaccinated?..... *Yes*
9. Do you now belong to the Active Militia?..... *Yes*
10. Have you ever served in any Military Force?..... *4 yrs 3 mos Ambulance Corps Montreal*  
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*

*Hammond* (Signature of Man).  
*DeLariviere* (Signature of Witness).

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

I, *Henry Hammond*, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Over-Seas Expeditionary Force, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Date *Sept 18* 1914.

*Hammond* (Signature of Recruit)  
*DeLariviere* (Signature of Witness)

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

I, *Henry Hammond*, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Date *Sept 23* 1914.

*Hammond* (Signature of Recruit)  
*R. A. Kennedy* (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 *Valcartier* this *23rd* day of *Sept* 1914.

*DeLariviere* (Signature of Justice)

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

*DeLariviere* (Approving Officer)

1 Bath  
88 VF

Description of Henry Carmichael on Enlistment.

Apparent Age 25 years 10 months.  
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 7 ins.

Chest measurement { Girth when fully expanded 37 ins.  
Range of expansion 2 1/2 ins.

Complexion Fresh

Eyes Blue

Hair Fair

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

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).

2 Vacc marks.  
4 moles on chest.  
1 right side face.

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

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

Date Sept 6 1914.

Place Valcartier

L. C. Sewang  
Bapt AMC  
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.

Henry Carmichael 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. S. Armiton (Signature of Officer)

Date Sept 23 1914.

mt. 3  
15-20 @



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				

Rank and Name CARMICHAEL Henry

Regimental No. 17207

Unit 7th., Battalion

Date of enlistment September 23rd., 1914

Place of birth Quebec

Married (Yes or No) No

If in Permanent Force

Name and Address of Next-of-kin

Charles R Carmichael,

Room 22 , 212 McGill Street,

Montreal.

Date and place of discharge

Reason for discharge

Character on discharge

Promotions or appointments

N/E R.33

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				
14/5/15.	W.O.	Wounded.	Base.		O.R. Cas Rep 61.
21.5.15.	W.O.	Died of Wounds.			24.4.15 Cas Rep. 67.
16.5.15	O.C. 3rd Ech	Struck off strength			vt. 4.15 Part II Orders No 12
6 15.15	Graves Reg. Comm.	Buried at Papeninghe new military Cemetery			vs. 4.15 Ref. B. 369



# MEDICAL HISTORY SHEET.

Surname Carmichael Christian Name Henry

Examined { on 21<sup>st</sup> day of Sept 1914  
at Valcartier P.Q.

Approved by

Rank 1st Lt M.O.

Birthplace { City or Town Montreal  
County

Apparent age 26

Trade or occupation Chemist

Height 5 Feet 7 Inches.

Weight 143 Lbs.

Chest measurement { Minimum 34 1/2 inches.  
Maximum expansion 37 inches.

Physical development good

Small-Pox Marks

Vaccination Marks { Arm Right Left 42  
Number 4

When Vaccinated last 1909

(a) Marks indicating congenital peculiarities or previous disease 4 moles on chest.

1 R. side of face

(b) Slight defects but not sufficient to cause rejection 1 tooth.

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	VACCINATIONS.
		M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
		M.O.
		M.O.
		M.O.

Enlisted on 21<sup>st</sup> day of Sept 1914 at Valcartier P.Q.

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>7 Bn</u>	<u>17207</u>		
Transferred to.. ..				

## 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\_\_\_\_\_

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				
No. General Reg C 57,		4	1	15	21	1	15	Bronchitis	18	well	R. D. Lee

NAME CARMICHAEL. Henry

Regimental No. 17207

Unit 7th Battalion.

Date of enlistment 23rd Sept. 14.

Place of birth. Quebec.

Married (yes or no) No

Amount of pay assigned monthly \$

To whom payable

Name and address of next-of-kin

Charles R. Carmichael,

Room 22, 212, Mc Gill Street, Montreal.

Date and place discharged 24/4/15

Reason for discharge died of wounds

Character on discharge

Date		PAY		Field Allowance		Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount	No.	Date					
22/9/14	31/10/14	40	1 <sup>00</sup>	40 -	40	10	4 -			44 -			44 -	
1/11/14	30/11/14	30	1 <sup>00</sup>	30 -	30	10	3 -			30 -			30 -	1/11/14 Transf. to H.Q.
1/12	31/12	31	-	31 -	31		3 10	3		30			30	
1/1/15	31/1/15	31	-	31 -	31		3 10	7		40			40	
1/2/15	28/2/15	28	1 <sup>00</sup>	28 -	28	10	2 80	1		-			-	
1/3/15	31/3/15	31	1 <sup>00</sup>	31 00	31	10	3 10	32		22 00			22 00	
1/4/15	30/4/15	30	1	30	30	10	3	44		6			6	
1/5/15	31/5/15	31	1	31	31	10	3 10	71		-			-	
1/6/15							105 20	105		12 -		40 70	40 70	69 09 transferred to Canada for payment
							64 50							
							459 69 09							

Difference of £x.

22/9/14 24/4/15 215 1<sup>00</sup> 215 - 215 10 21 50 - 236 50

Cash payments

172 00 at 4/- to dollars  
Balance dueStatement of  
SEP 8 1915  
Account renderedDATE  
PAY OFFICE, N. E. BRANCH  
AUG 26 1915  
CANADIAN CONTINGENTS

[illegible]

a m. Number. 17207..... Rank. L/Cpl.....  
Surname. CARMICHAEL.....  
Christian Names. Henry.....  
Unit. 7th Bn. Can. Inf. Theatre of War. France  
Dates of Service. D.  
Remarks. Father  
Latest Address. John B. Carmichael Esq.  
171. Bourbonniere Ave.  
Roll No. B Page 897 Maisonneuve  
Montreal Que.

G-3886-*Deep* - MAR 5 - 1921

441215 *RM*

AUG 4 1921

17207

Carmichael, Ote. Henry <sup>649. G 273</sup>  
7th Bn. <sup>Medals</sup>

Name & Address of Legatee

John R. Carmichael (F) ✓ <sup>Decorations</sup>  
171 Bourbonniere Ave.  
Maisonneuve, Montreal, Que.

Name & Address of Next of Kin

Serial No 772694  
As above  
Eligible for 14/15 Star. Appl. 7th Bn.

Name & Address of Female Next of Kin

Mrs. John R. Carmichael (M)

As above  
Dep. MAY 10 1920

Memorial L: 701

C. of S.

Q

*M* Desp MAY 11 1920 6 7037

Scroll Desp. 27-1-21 Regn. No 2-14000

Plague Desp.                      Regn. No P14164

SURNAME.

*Carmichael.*

(649-13-273)

CARD NO.

2

CHRISTIAN NAMES

*Henry*

REGL. No.

*17207.*

RANK

*Pte.*

UNIT

*7th.*

FORMER CORPS

*3rd Ambulance Corps. 4 yrs.**Bn.*

NEXT OF KIN,

NAMES IN FULL

*Carmichael Charles R.*

RELATIONSHIP TO SOLDIER

*Not stated.*

ADDRESS

*Room 22, 212 McGill St.  
Montreal, P.Q.*

CHANGE OF ADDRESS

COUNTRY OF BIRTH

*Canada. Montreal, P.Q.*

DATE

*Nov. 25th. 1888.*

PLACE OF ATTESTATION

*Valcartier, P.Q.*

DATE

*Sept. 23rd. 1914.**018.7-10-14 7/23*

L. L. 10437. M. &amp; D. 7253.

M. F. W. 22. 100M. -11-16. H. Q. 1772-39-333.

MARRIED

SINGLE *yes.*

WIDOWER

TRADE OR CALLING

*Chemist.*

RELIGION

*Presbyterian.*

DESCRIPTION.

APPARENT AGE

*25* YEARS

*10* MONTHS

HEIGHT

*5* FEET

*7* INCHES

CHEST MEASUREMENT

*37* INCHES

EXPANSION

*2 1/2* INCHES

COMPLEXION

*Fresh.*

EYES

*Blue.*

HAIR

*Fair.*

DISTINGUISHING MARKS

*2 vacc. marks. 4 moles on chest. 1 mole right side of face.*

MEDICAL EXAMINATION.

PLACE

*Valcartier, P. Q.*

DATE

*Sept. 5th. 1914.*

*Present Address - Not stated.*

NAME

Carmichael Henry

H. Q. FILE No. 649-

REGT'L. No.

17207 ✓

RANK AND CORPS

Pte

7th Batt.

CABLE

NO.

DATE

NATURE OF CASUALTY

NO.

409

FOLL. X

C1135 14/5/15 Wounded

C. 1423. 24-5-15 Died of wounds April 24<sup>th</sup>, 1915.

B2090a 11/8/15 Roven " " " " " "

LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

✓ 61

Rep. from Base by telegram

13/5/15

wounded.

✓ 67

Rep. from the Base.

24/4/15

Died of wounds.



✓ Name Carmichael, H. Rank Private

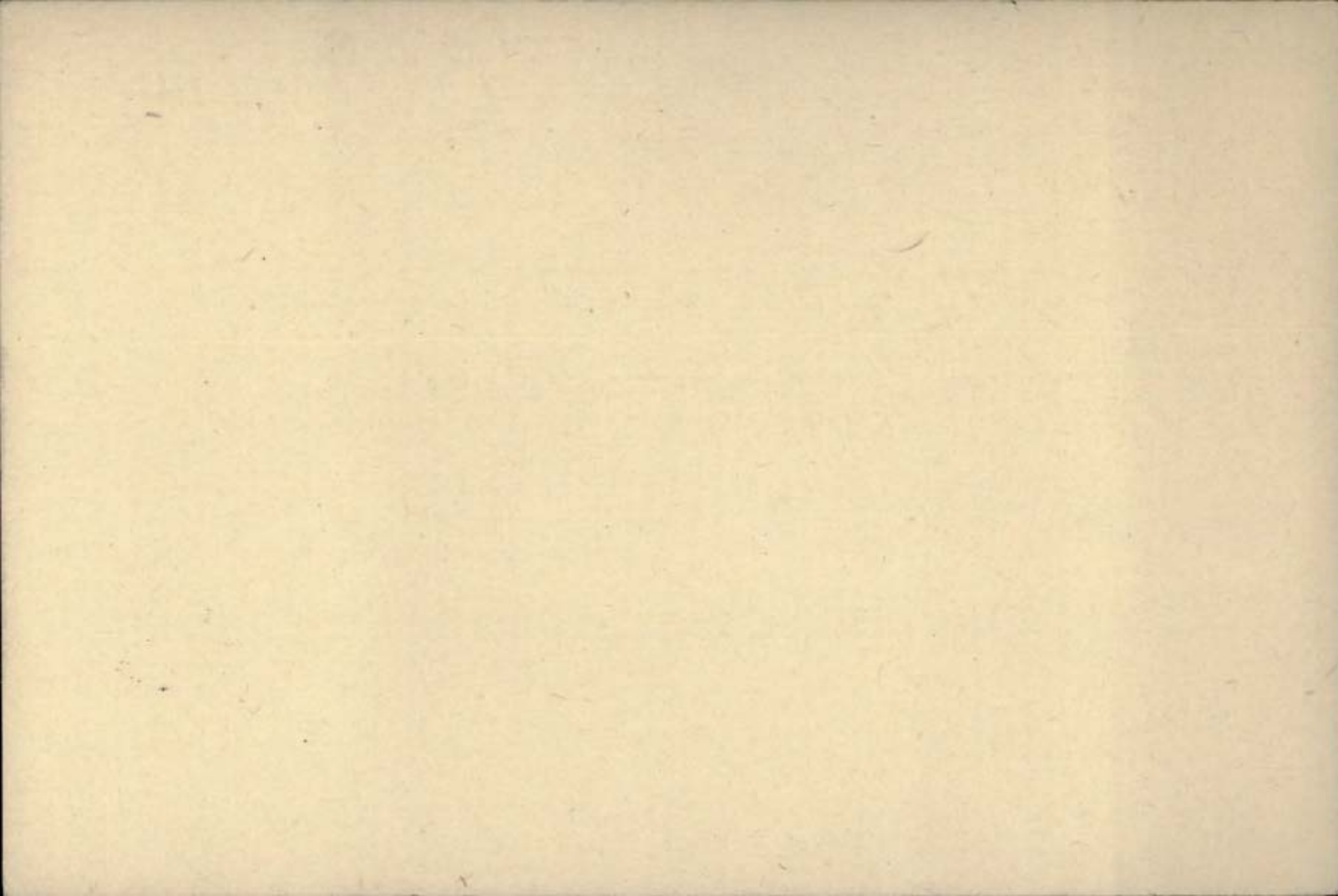
Reg. No. 17207

Unit 7th Battalion Canadians.

25-C-41

Next of Kin

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
24-4-15.	Reported from Base	DIED OF	WOUNDS.	61. 67		



No. 17207. RANK Psc

NAME Carmichael H.

T. O. S. 25/8/14 (D<sup>13</sup> 25/8/14) UNIT 88th Regt. V. F.

M. D. #11.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914 Aug 25	1914 Aug 31	✓	Sharon on 7th Bn payroll	
Sept. 1.	Sept. 3.	✓		
Sept 4.	Sept 21.	✓		
Sept. 22	Oct. 31	✓		

UNIT SAILED  
OCT 3 1914

Surname *Barmichael. H.* Christian Name or Names  
Rank *Pte.* Unit *4th Bat.* Co. Troop Batty.  
Hospital Date of Admission

Transferred *no. 1. G.H.* Hosp. *H. 1. 15.*

Hosp.

Hosp.

Hosp.

Diagnosis

*Bronchitis.*

(1)  
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnoses: if more than one state present

DISPOSITION

*Dis to duty, 21.1.15.*

Date

REMARKS

*ADD. Bk. S.  
et. 21/5/15 # 67*

*Died of wounds  
24/4/15.*

*Rep. from base*

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.