

Unit 67th Battalion CEF Rank Lieut. Name A. M. Hall

OFFICERS' DECLARATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

ORIGINAL

QUESTIONS TO BE ANSWERED BY OFFICER.

(ANSWERS.)

1. (a) What is your Surname? Hall
(b) What are your Christian Names? Alexander MacRae
2. (a) Where were you born? (State place and country) Three Rivers Que.
(b) What is your present address? Victoria, B.C., Willows Camp
3. What is the date of your birth? June 14th, 1881
4. What is (a) the name of your next-of-kin? D. M. Hall
(b) the address of your next-of-kin? Oshawa, Ont.
(c) the relationship of your next-of-kin? Brother
5. What is your profession or occupation? Manager
6. What is your religion? Presbyterian
7. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes
8. To what Unit of the Active Militia do you belong? 5th C. G. A.
9. State particulars of any former Military Service 3 years, 59th Batt.
10. Are you willing to serve in the
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? Yes

The undersigned hereby declares that the above answers made by him to the above questions are true.

A. M. Hall (Signature of Officer.)

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him* fit for the CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Date October 14th 1915

Place VICTORIA, B. C.

*Insert here "fit" or "unfit."

RE. M. Gibson
R. M. Gibson CAPT. C.A.M.C. 67th BATT.
Medical Officer.

M. F. W. 51.

20m.—10-15.
H. Q. 1772-39 917.

QUESTIONS TO BE ANSWERED BY OFFICER

1. What is your name?

ORIGINAL

2. What is your rank?

3. What is your service number?

4. What is your date of birth?

5. What is your date of entry into service?

6. What is your present position?

7. What is the date of your last examination?

8. What is the name of your commanding officer?

9. What is the address of your next of kin?

10. What is the relationship of your next of kin to you?

11. What is your position of responsibility?

12. What is your position of responsibility?

13. What is your position of responsibility?

14. What is your position of responsibility?

15. What is your position of responsibility?

16. What is your position of responsibility?

17. What is your position of responsibility?

18. What is your position of responsibility?

19. What is your position of responsibility?

20. What is your position of responsibility?

CERTIFICATE OF MEDICAL EXAMINATION

I have examined the above named Officer and find him to be fit for service.

I certify that the above named Officer is fit for service.

[Signature]
Medical Officer

[Signature]
Officer

C.E.F.

HALL ALEX. MACRAE

LIEUT

67 BN

01933

K. IN A. 4-9-16





No. 103027 RANK

NAME

Wall, A M

Plt
(Lieut)

T. O. S. 4-10-15

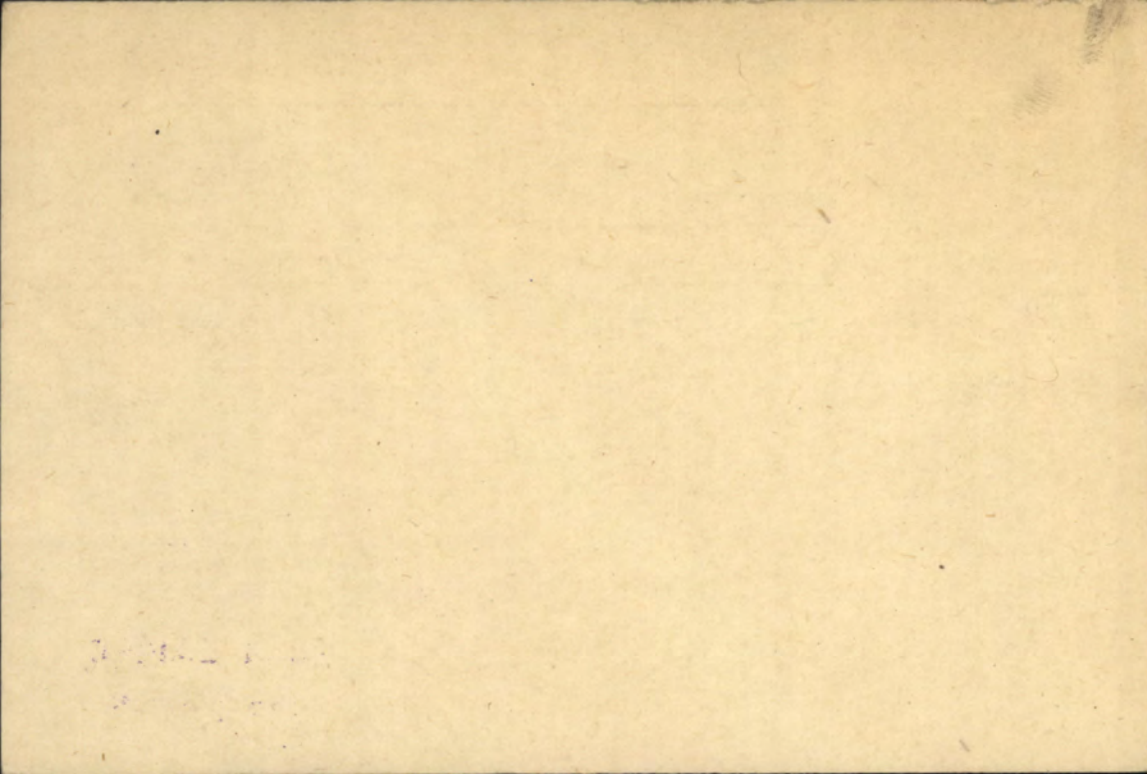
DU 51 Oct-1915

UNIT

67th Battalion

M. D. 11

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915	1915			
Oct-4	Oct-31	L		
	Nov	L		
	Dec	L		
1916	1916			
	Jan	L		
	Feb	L		
	Mar	L		
April pay list not available				
			app. Lt. 10-2-16	DO 162-9-2-16
UNIT SAILED				
APR 21 1916				



✓
✓
✓
✓
HALL, Alexander MacRae, Lieut.

✓
67th Bn.

MEDALS &
DECORATIONS

Donald McRae Hall (Brother)
Box 462, Oshawa, Ont.

PLAQUE &
SCROLL

scroll Desp.

Brother, as above.

Plaque Desp.

MEMORIAL
CROSS

No one entitled.

FEB 20 1921

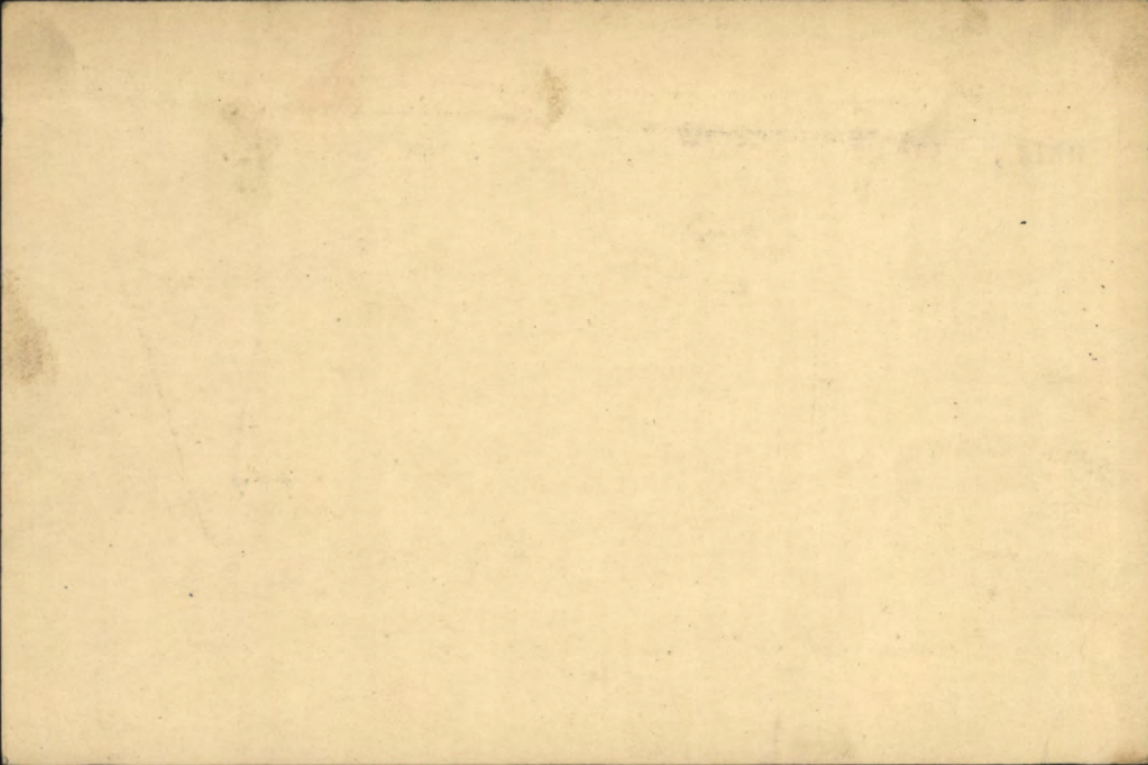
Reqn. No. 2-71830

JUN 13 1922

Reqn. No. 139919

32784

Not elig. 14/15 star.
Elig. V.M.
B.W.M.



NAME

RANK AND CORPS

CABLE

No.

DATE

NATURE OF CASUALTY

REGT'L NO

H. Q. FILE No. 649-

FOLLOWS

No.

FOLLOWS

No.	DATE	NATURE OF CASUALTY
0418	6-9-16	Killed in action Sept. 4 th 1916.
67B. 2090a	Ronen 11-9-16	Killed in action Shot through lungs

LIST No

HOSPITAL

DATE OF
ADMISSION

REMARKS

463

Rep. from Base -

4-9-16

Killed in action.

Reg. No.

Q. J. B. 104-93

Next of Kin **Canada.**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
4-9-16	Rep. from Base.	KILLED IN ACTION.	463	0.418	7/9	

[illegible]

Number

Rank

Lieut

B

Surname

HALL.

Christian Name

ALEXANDER. MACRAE.

Units

Theatre of War

France

Date of Service

2-4-16.

13-8-16

4-9-16

Remarks

B.C.R.

Brother

D

Latest Address

Donald Macrae Hall.
Box 462, Oshawa.
Ont.

Roll No

Page 10777

Port, ship, and date of arrival

Next of kin

Address on leave

Address on discharge

Transportation issued

Yes
No

Date

Character on
discharge

Previous occupation

Date and place of
enlistment

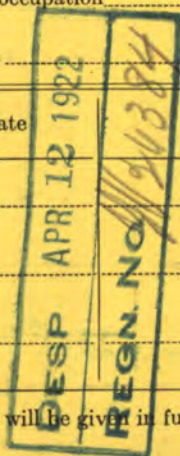
Diagnosis

Date of Medical
Boards

Date

Remarks

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



Hall.

A.

MacR.

Lieut.

67(Pion.). Battn.

Reported from base:-.

KILLED IN ACTION:-. 4-9-16.

C.L. 7-9-16. 463.

A.M.D. 2 DEPT.

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

R

Surname

Christian Name

Reg. No.

Rank

Unit

MEDICAL BOARD held at

Date

Serial No.

(1)

Other Medical Boards at

Date

Serial No.

(2)

(3)

(4)

(5)

Condition found by Board

Disposition Recommended

(1)

(2)

(3)

(4)

(5)

PENSIONS & CLAIMS BOARD held at

Date

Disposition

Remarks

DUPLICATE

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins.....

67th BATTALION C.E.F.

(2) Regimental Number

(3) Full Name of Soldier.....**Alexander MacRae Hall**.....

(4) Place of Birth.....**Three Rivers, Ont.**.....

(5) Are you married, or not ?**Not married.**.....

(6) If married, state,
(a) Full name of your wife.....

(b) Present Postal Address.....

(7) Are you a widower ?

(8) Have you any children ?

If so, give number of boys and girls.....

Also their names and ages.....

(9) Is your Father alive?.....No......

If so, state name and address

(10) Is your Mother alive?.....No......

If so, state name and address.....

(11) If your Mother is a widow.....

Are you her sole support, or not?.....

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

.....Donald MacRae Hall (Brother).....

.....Oshawa Ont......

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

(15) Are you insured?.....Yes.....

If so, in what Company?.....Home Life Assurance Co., New York.....

Have you made arrangements for payment of your Insurance premium.....Yes......

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

MAR - 9 1910

Date.....

.....W. Christie
Officer Commanding **MAJOR.**

For Officer Commanding (Incapacitated)

ORIGINAL

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Hall Christian Name Alexander McRaeExamined { on 4th day of Oct 1915
at Victoria BcBirthplace { City or Town Three Rivers
County QuebecApparent age Thirty fourTrade or occupation SalesmanHeight Five Feet Ten Inches.Weight One Hundred & fifty four Lbs.Chest measurement { Minimum inches.
Maximum expansion inches.Physical development GoodSmall-Pox Marks noneVaccination Marks { Arm Right Left
Number 1When Vaccinated last in childhood(a) Marks indicating congenital peculiarities or previous disease none

(b) Slight defects but not sufficient to cause rejection

noneApproved by J. H. Bryant
Rank 1st Lieut M.O.

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		M.O.
		M.O.
		M.O.
		M.O.
3/3/16	Fit for Overseas	M.O.
	W. Richardson	M.O.

Date	Result	VACCINATIONS.
	OK	T. B. C.
		M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
17/11/15	OK	2 MB
2/12/15	OK	2 MB
15/12/15	OK	2 MB
		M.O.
		M.O.
		M.O.

Enlisted on 4 day of Oct 1915 at Victoria Bc

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>67 BATT</u>	<u>103027</u>		<u>Oct 4-1915</u>
Transferred to.. ..		<u>Lieut.</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.

Hal

Christian Name

Alexander Mac Rae.

[illegible]

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF

DATE

AUTHORITY

DATE

AUTHORITY

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.

67th Battr

Lieut

12 4/16

H. Canada

R.O. 604 b. 1. D.

d/ 12 4/16.

Name Hall

Initials Alex McRae

Bank box 100.

Killed in action 4⁹/16 Lt 462 7⁹/16

DATE

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

SPECIAL AUTHORITIES
To be initialed by P.M. in every case

INITIALS

1916

29.4 Pay April (R)

(801)

97

Bank

97

May 23 Pay May (R)

111 60

Bank

111 60

June 20 Pay June (R)

108

26 Bank

108

July 25 Pay July (R)

111 60

25 Bank

111 60

Aug 28 Pay Aug (R)

111 60

24 Bank

111 60

Sept 19 Pay Sept (R)

108

Oct. 9. Unpaid check. Advances.

13 26

Nov 15 referred to vic. Branch

94 74

108

94 74

PrA to be carried forward.

Transfer to N.E. Ledger

To L. 13. From L. 15. Oct. 17/16.

UNIT

MONTHLY AMOUNT

BANK IN WHICH PAY & ALLOWANCES DEPOSITED

NAME	DATE OF APPOINT	MARRIED (YES OR	NEXT OF KIN:—	DATE NON-EFFECT	AND GAL

PERIOD		No. of Days	Regt. Rate	Amount of Regimental	Command	Adjutant	Gr. from Prev. Account	TOTAL PAY	Rate of Field Allowance	Amount of Field Allowance	P. F. Allowance	Messing	Subsistence	TOTAL	ALLO
From	To														
PAY ALLOWANCES															

SUNDRY PAYMENTS

PARTICULARS

DATE _____

CHEQUE NO.

ASSIGNED PAY.

UNIT. *67.13 attalion*
NAME OF DATE AUTHORITYRANK. *Lieutenant*
DATE AUTHORITY

NAME. ✓

Beneficiary

Address

Name *Hall,*
Initials *A. Mach-*

Amount. \$

Bank *Leys rbo*

Separation Allowance issued. Yes or No.....

Killed in action 4⁹/₁₆ b.L. 463. 7⁹/₁₆

Date	No. of Days	Regt. Rate	Amount Regimental	F. A.	Messing	Other Credits	Total	Ass. Pay	Charges	Bank	Debit Balance	Credit Balance	Initials
<i>1. 4. 16</i>													
<i>30. 4. 16</i>	<i>30</i>	<i>\$ pay 60-74 1. Mess</i>	<i>60</i>	<i>18</i>	<i>19</i>		<i>97</i>			<i>97</i>			<i>Miss from 12⁴/₁₆</i>
<i>1. 5. 16</i>													
<i>31. 5. 16</i>	<i>31</i>		<i>62</i>	<i>18 60</i>	<i>31</i>		<i>111 60</i>			<i>111 60</i>			
<i>1. 6. 16</i>													
<i>30. 6. 16</i>	<i>30</i>		<i>60</i>	<i>18</i>	<i>30</i>		<i>108</i>			<i>108</i>			
<i>1. 7. 16</i>													
<i>31. 7. 16</i>	<i>31</i>		<i>62</i>	<i>18 60</i>	<i>31</i>		<i>111 60</i>			<i>111 60</i>			
<i>1. 8. 16</i>													
<i>31. 8. 16</i>	<i>31</i>		<i>62</i>	<i>18 60</i>	<i>31</i>		<i>111 60</i>			<i>111 60</i>			
<i>30. 9. 16</i>	<i>30</i>		<i>60</i>	<i>18</i>	<i>30</i>		<i>108</i>		<i>① 13 76</i>	<i>539 80</i>			<i>① Unpaid cheque.</i>

*Credit Balance 94 74**Mc. Nov 16*
Feb 17
*Apr 17**12 84**3 67*
*103 91**107 58 C.I.E. 12⁸⁴ Sch 496.*
103 91 300 Kirovskiy
See Adv. V. 1980
*for sett. 24¹⁷*Statement of
FEB 22 1917
Account rendered

IR. Rank and Name Lieut. HALL, Alexander MacRae

Regimental No.

Name and Address of Next-of-Kin D.M. Hall, (Brother) 1916
67th Bn

Unit 67th Bn.

Oshawa, Ontario, Canada.

Date of enlistment Victoria, 14th Oct, 1915.

Place of birth Three Rivers, Quebec,

Married (Yes or No) NO.

Date and place of discharge

If in Permanent Force

Reason for discharge

Character on discharge

Promotions or appointments

LEFT CANADA 31-3-16.

A.F.B. 103

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				
17-4-16.	67 Bn	Returned Succeeded on command for Dist Shorncliffe	11-5-16.	17-4-16	St II Ord 6 (67)
12-5-16.	67 Bn	74 & 75 Bns from On command Whitehall range attached to	Returned 23-5-16	13-5-16	St II Ord 215. Page 6nd 5. (67 Bn)
14-8-16	"	proceeded ops.		13-5-16	St II Ord 239.
7-9-16.	See.	Killed in action		13-8-16	A.F.B. 103. St II Ord 75
				4-9-16	CL 463 P.O. 4th Par Bn 9-8-16 (97B 104-93 2090A) Estates 10-10-16

A.F.B. 103

22 NOV. 1918

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

Casualty Form—Active Service.

67th BATTALION C.E.F.

Unit, Regiment or Corps

Regimental No.

Rank

Name

C. E. F.

Enlisted (a)

Terms of Service (a)

Service reckons from (a)

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				

Embarked FOR Canada
Seabarked England

Halifax
Liverpool

11/4/16
11/4/16
13th

PROCEEDED OVERSEAS WITH 67th PIONEER BATT.

AUG 10 1916

66 Harbottle

MAJOR AND ADJUTANT.

14. 8. 16.	O.C. 67 th	Disembarked.	Ltd Avre.	14. 8. 16	Nominal Roll.
7. 9. 16	O.C. 4 th	Killed in action Shot through lungs by Bullet.	Poppy Lane Trench	12.15 am 4. 9. 16	D.C.S 9. 8. 9. 16 P.II. 84. 8. 9. 16

[Signature]
Lieutenant.
For. Lt. Col. A.A.G.
Canadian Section.

(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.

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.

SURNAME.

Hall, (352-5-49)

S.O.S. Comm.

CHRISTIAN NAMES

*Alexander MacRae.**9-2-16. Ty.*REGL. NO. *103027.*

RANK

*Pte.*UNIT *67th.**Bn.*

FORMER CORPS

59th. Bn.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Hall, Donald MacRae,

RELATIONSHIP TO SOLDIER

Brother.

ADDRESS

Oshawa, Ont.

COUNTRY OF BIRTH

Canada, Three Rivers, P.Q.

DATE

June 14th 1881.

PLACE OF ATTESTATION

Victoria, B.C.

DATE

*Oct 4th, 1915.**O/S. 1-4-16.*

MARRIED

SINGLE

Yes

WIDOWER

TRADE OR CALLING

Salesman

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

34

YEARS

3

MONTHS

HEIGHT

5

FEET

10

INCHES

CHEST MEASUREMENT

34

INCHES

EXPANSION

4

INCHES

COMPLEXION

Fresh

EYES

Blue

HAIR

Brown

DISTINGUISHING MARKS

Index finger of the left hand
is missing. Bullet wound in left chest.
Bullet wound on head of Penis.

MEDICAL EXAMINATION.

PLACE

Victoria, B.C.

DATE

Oct 4th. 1915

352-5-49.

ARD NO.



SURNAME.

Hall.

CHRISTIAN NAMES

Alexander McRae.

FOLL.

REGL. NO.

103027

RANK

Lieut.

UNIT

67th.

Bn.

FORMER CORPS

59th. Bn. (3 yrs.) 5th. h. G.A.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Hall D. M.

RELATIONSHIP TO SOLDIER

Father.

ADDRESS

Orshawa Ont.

COUNTRY OF BIRTH

Canada, Three Rivers

P.O.
DATE

June 14th. 1881.

PLACE OF ATTESTATION

DATE

0/3 1-4-16 ³⁷⁴/₂

L. L. 26989 M & D. 8191.

M. F. W. 22. 100M.—8-17. H. Q. 1772-39-339.

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

Manager

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION.

PLACE

Victoria B. C.

DATE

Oct. 14th. 1915.

Present Address: Willow Camp, Victoria B.C.