

Original

46621
67

ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION. (ANSWERS).

1. What is your name?..... *William Thorburn Jardine.*
2. In what Town, Township or Parish, and in what Country were you born?..... *Montreal*
3. What is the name of your next-of-kin?..... *Mother - Ellen Fraser Jardine.*
4. What is the address of your next-of-kin?..... *1544 Prince Street Montreal.*
5. What is the date of your birth?..... *25th December 1884.*
6. What is your Trade or Calling?..... *Clerk*
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?..... *No*
10. Have you ever served in any Military Force?..... *Yes - 3rd Victoria Rifles 3 years*
If so, state particulars of former Service. *5th Royal Highlanders 4 "*
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*

William Thorburn Jardine (Signature of Man).
Charles Hawkins (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *William Thorburn Jardine*, 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.

William Thorburn Jardine (Signature of Recruit)

Date *Aug 29* 1914. *C. F. Hawkins* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I,, 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.

William Thorburn Jardine (Signature of Recruit)

Date *Aug 29* 1914. *C. F. Hawkins* (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 *Montreal* this *29th* day of *August* 1914.

W. J. [Signature] (Signature of Justice)

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

..... (Approving Officer)

Description of William Thorburn Jardine Enlistment.

Apparent Age 30 years months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 8¹/₄ ins.

Chest measurement { Girth when fully expanded 34¹/₂ ins.
 { Range of expansion 3 ins.

Complexion Fair
 Eyes light gray
 Hair light

Religious denominations. { Church of England
 { Presbyterian yes
 { 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).

vaccination much better
small brown spot - 1/2 inch up from tip of nose.

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 Aug 30 1914.

Place Montreal

[Signature]
Captn. [Signature]
 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.

..... 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] (Signature of Officer)

Date Oct. 14th 1914.

[Signature]

B.P. 13, 14, 15

DISCHARGE DOCUMENTS

R. O. No.

H. Q. No.



- 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.....



Name JARDINE, W^m. THORBURN.

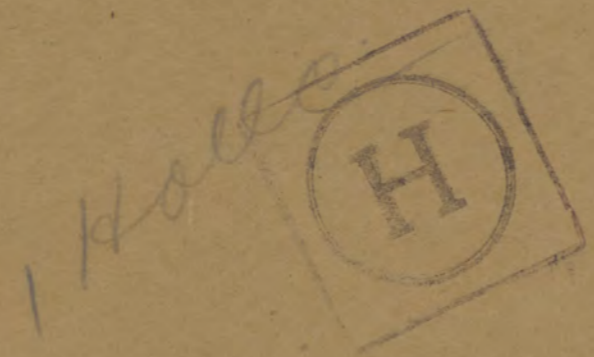
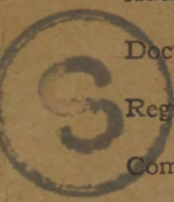
Regt. No. 46624 Rank Pte

Corps 17th Bn.

Killed in Action.

7.9.16.

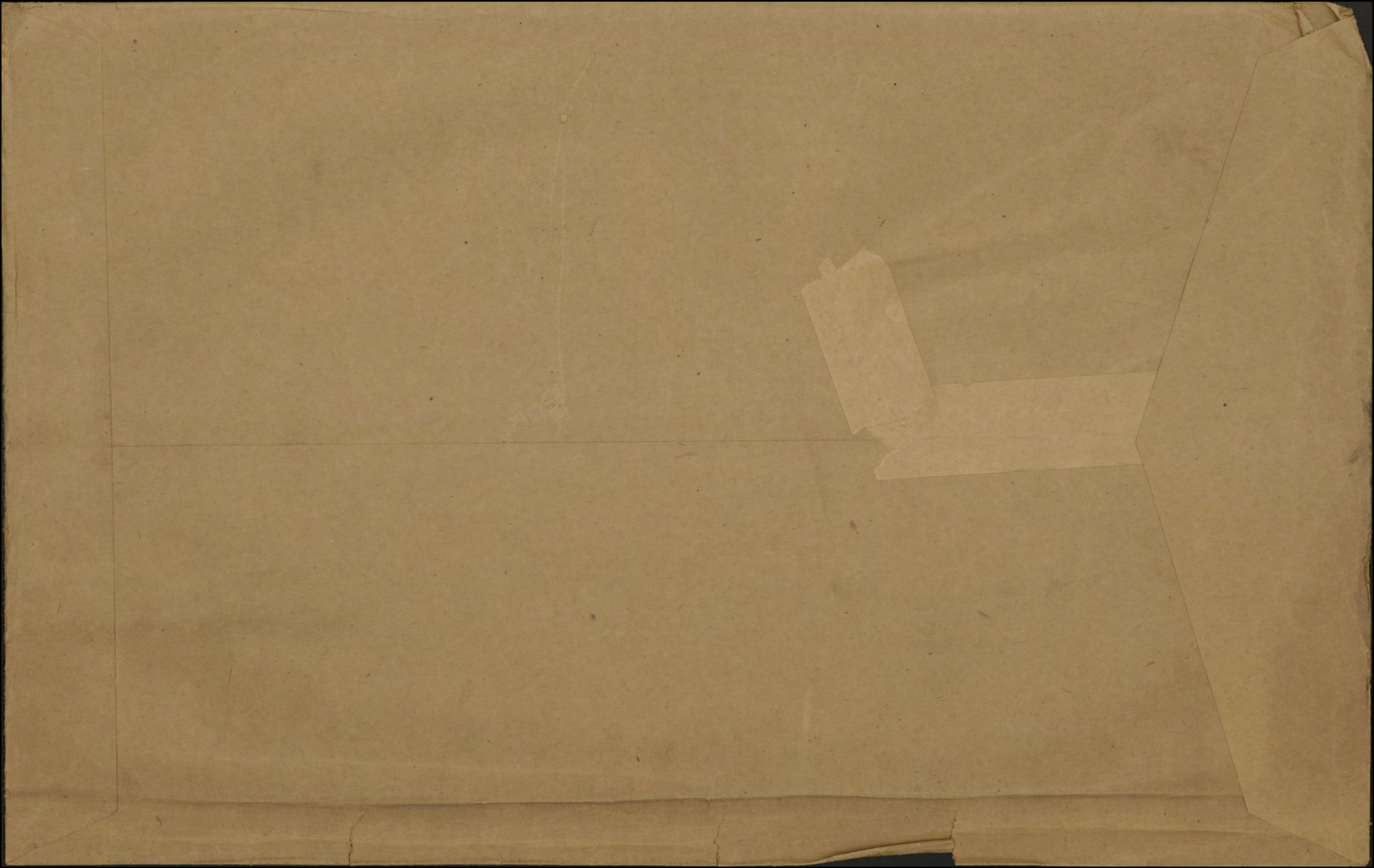
03255



4
 10-23
 23-23
 31-23
 4

*1.5.122-1.
A.G.B.178-15.*

13/10/18



To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital.
Army Form B. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname JARDINE, Christian Name W T

TABLE I.—GENERAL TABLE.

6th Jan. 1916.

Birthplace ... Parish _____ County _____

Examined ... { on _____ day of _____ 191
at _____

Declared Age ... years _____ days _____

Trade or Occupation ... _____

Height ... feet _____ inches _____

Weight ... lbs. _____

Chest Measurement { Girth when fully Expanded _____ inches.
Range of Expansion _____ inches.

Physical Development ... _____

Vaccination Marks { Arm ... Right _____ Left _____
Number _____

When Vaccinated ... _____

Vision ... { R.E.—V= _____
L.E.—V= _____

(a) Marks indicating congenital peculiarities or previous disease ... { (a) _____

(b) Slight defects but not sufficient to cause rejection ... { (b) _____

Approved by (Signature) _____
(Rank) _____
Medical Officer.

Enlisted ... { at _____
on _____ day of _____ 191

Joined on Enlistment	Corps.	Regtl. No.
	15th Batt:	46561
Transferred to		62

Became non-effective by ... _____

This Medical History Sheet has been compared with the Corresponding Attestation Paper, and entries made in red have been taken from the Attestation Paper.
(Signature) _____
(Rank) _____

The Medical History Sheet of all men proceeding overseas, must be returned by the Officer commanding their unit to the Record Office when they leave England.

Lieut.-Col.
In Charge of Records,
Canadian Contingent.

W. J. ...

List in the case of Warrant Officers treated in quarters.

Records bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.

Signature of Medical Officer

Discharged (A)
swabs from Post swabs reported negative
and right tonsillitis with fever 2 days.
Discharged well

Duplicate Medical History Sheet
posted to here.
Medical Registrar
Record Office.

Allen & Gray
L. R. M. G.

Rank and Name

JARDINE,

W. T.

Reg # 1/15/62

44325

Regimental No 6621

46621

Name and Address of Next-of-kin

Unit 17 Batt

Ellen F. Jardine

Date of enlistment 29 Aug. 1914.

1544 Manse Street, Montreal, P.Q.

Place of birth Canada

Married (Yes or No) No.

If in Permanent Force

Date and place of discharge

Reason for discharge

Character on discharge

Promotions or appointments



m-l
13-10-20
72

W. B. B. 17

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				
		Transferred to 15 th Battalion			
10/4/15.	W.O.	Adm. to Australian H.	Boulogne	31/3/15.	Nasal Growth. Cas. report # 29
15/4/15	do	Trans. to #1. C. C.	France	7/4/15	do do 33
16.5.15	Ab. 15 th	20 days F.P. No I Drunkenness.	Auth O.I. CmD depot. Rouen	16.5.15	Part II O. #10
3.6.15	W.O.	Adm. # 3 General Base Depot.		23.5.15	Nasal Growth Cas. report # 72
11.12.14	O.C. 17 th	10/- fine + reduced for drunk on duty	Sling Plantation		Part II Order # A 43
26.1.15	do	20/- fine for "Drunk on parade"	Tidworth		do do # A 93
		On strength 15 th			
22 ¹⁰ / ₁₅	w.o.	Adm. 7 th Can. F. Amb.	do	7 ¹⁰ / ₁₅	Master Roll Cas. List 179. Defective Eyesight
22 ¹⁰ / ₁₅	w.o.	Discharged to duty	do	8 ¹⁰ / ₁₅	Cas. List 179
3-11-15	w.o.	Adm. # 4 Stat. Hoop.	St. Omer	27-10-15	" " 189 Def. vision
19-11-15	w.o.	Discharged to duty	" "	10-11-15	Cas. Report # 201

Jardine W.Y. 46621 Pte.

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				
					Cerebro contact
4-1-16	WO	Military Hospital	Fulham	26- ¹² / ₁₅	C.L. #234(2)
1-1-16	% 15 th	Granted 7 Days leave	France	19- ¹² / ₁₅	Part II O ⁷ 1
10.1-16	WO.	Discharged to duty	D ^o	6- ¹ / ₁₆	bas Lt #63. P.R. Off ^r
12-1-16	WO.	Discharged to duty	D ^o	6- ¹ / ₁₆	bas; Lt #241.
7.1.16.	% 43 rd	Adm Military Hospl	Fulham	26- ¹² / ₁₅	Part II O ⁵ .
7.1.16	% 43 rd	Taken on Strength	Storncliffe	26.12.15	" " " #5
10.1.16	D ^o	Disch from Mil Hos	Fulham	8.1.16	" " " #6.
19.1.16	D ^o	Returned to Unit	Overseas	19.1.16	" " " #13
16.2.16	WO	Rejoined unit	"	3.2.16	bas; Rept 270
21.2.16	% 15 th	28 Days I.P. #1.	Field	10.2.16	Part II O ⁹ 9. Adunke
25.3.16	% P.R.O.	Adm Fulham Mil Hos	Hammermith	26- ¹² / ₁₅	bas Rept #102
13.9.16	% 15 th	Killed in Action	Field	7.9.16	Part II O ⁴⁰
				7.9.16	bas Rept 2444 of 18.9.16

*but correct
K 9 101/1uff/15/9*

~~46621~~ **Casualty Form—Active Service.**

~~#561~~ Regiment or Corps 17th Battr

Regimental No. K 6621 Rank Pte Name Jardine W. J

Enlisted (a) _____ Terms of Service (a) _____ Service reckons from (a) 1.11.14

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				
<u>15.2.15</u>	<u>66.15 Bn.</u>	<u>Arrived in France</u>	<u>St Nazaire</u>	<u>15.2.15</u>	<u>ref.</u>
<u>11/1/15</u>	<u>O.C. Australian Hospital</u>	<u>Belmes. Naval front. 3034 of Regt</u>			
<u>8/4/15</u>	<u>D.</u>	<u>Transfr. 3034-IX.16</u>		<u>7/4/15</u>	<u>To hot Camp.</u>
<u>23/5/15</u>	<u>3rd Base Depot.</u>	<u>Transfr.</u>	<u>3rd Base Depot.</u>	<u>23/5/15</u>	<u>Home, well</u>
<u>24/6/15</u>	<u>D.</u>	<u>To repair unit</u>		<u>24/6/15</u>	
<u>8/7/15</u>	<u>O.C. 15 Bn.</u>	<u>Sick</u>	<u>To Hosp.</u>	<u>7/7/15</u>	<u>B.213</u>
<u>9/7/15</u>	<u>3C.P.A.</u>	<u>Def. eyesight</u>	<u>To L.C.F.A.</u>	<u>7/7/15</u>	<u>A.36</u>
<u>10/7/15</u>	<u>2C.P.A.</u>	<u>Transfr.</u>	<u>To duty.</u>	<u>7/10/15</u>	<u>A.36</u>
<u>15/7/15</u>	<u>O.C. 15 Bn.</u>	<u>Rejoined unit</u>		<u>8/10/15</u>	<u>R.213</u>
<u>20/7/15</u>	<u>1C.P.A.</u>	<u>higher Blindness</u>	<u>1C.F.A.</u>	<u>22/7/15</u>	<u>A.36</u>

(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, Shoering Smith, etc., etc., also special qualifications in technical Corps duties.

46621 Pte Jardine W ~~W~~

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				
27/10/15	4 Stationary	By Vision Transfer	4 Stationary	27/10/15	W.3034
19/11/15	O.C. 15 Bn.	Returned from Hosp.	With Wvib.	19/11/15	B.213
24/12/15	" " "	granted 7 days leave to U.16		19/12/15	B.213
20/1/16	C.A.D.	absentee returning from leave.		20/1/16	N.R. 101/102/3/196.
4/2/16	" "	Proceeding to join unit.		2-2-16	N.R. 101/102/3/209 DC No 213
7/3/16	O.C. 15 Bn	Returned unit.	Field	3/2/16	108/109/15/14 DC No 224.
4/2/16	O.C. 15 Bn	Returned to unit. for leave Hospital		6-1-16	B.213 DC No 216
11/2/16	" " "	awarded 28 days F.P. No. 1 for drunk on afternoon parade 7-2-16.	Field	10/2/16	B.2069
18-3-16	Officers/Quar.	Correct number should be 46561 (cancelled)			File 108/109/15/14
10.6.16	S-	Preceding entry cancelled. The correct Regt. number of Pte Jardine is "46621"			File K.1. 101/109/15/9
8.9.16	O.C. 15 Bn.	Killed in action	Field	7-9-16	File K.1. 137-1036. SCS 324-13-9-16 Last F.O. 408 13-9-16.
					J. Whogah look for Lt. Col. A.A.G. in section in section

Pt 2 ends
No 9 of 2/2/16

ORIGINAL.

46621

used in place of Army Form
B.178

MEDICAL HISTORY OF

Surname Jardine Christian name William Thornton

Table 1.-GENERAL TABLE

Birthplace Montreal Parish Stovine Quebec County 4
 { on 26th day of January, 1915
 Examined { at Sidworth months
 Declared Age 30 years 4 days
 Trade or Occupation Insurance broker
 Height 5 feet 10 inches
 Weight lbs.
 Chest measurement { Girth when fully Expanded 38 inches.
 { Range of Expansion 2 1/2 inches.
 Physical development

Vaccination marks { (Arm Right Left.
{ (number

When Vaccinated
Vision { (R.E.-V-
{ (L.E.-

(a) marks indicating congenital peculiarities or previous disease { (a) ✓
(b) Slight defects but not sufficient to cause rejection { (b) ✓

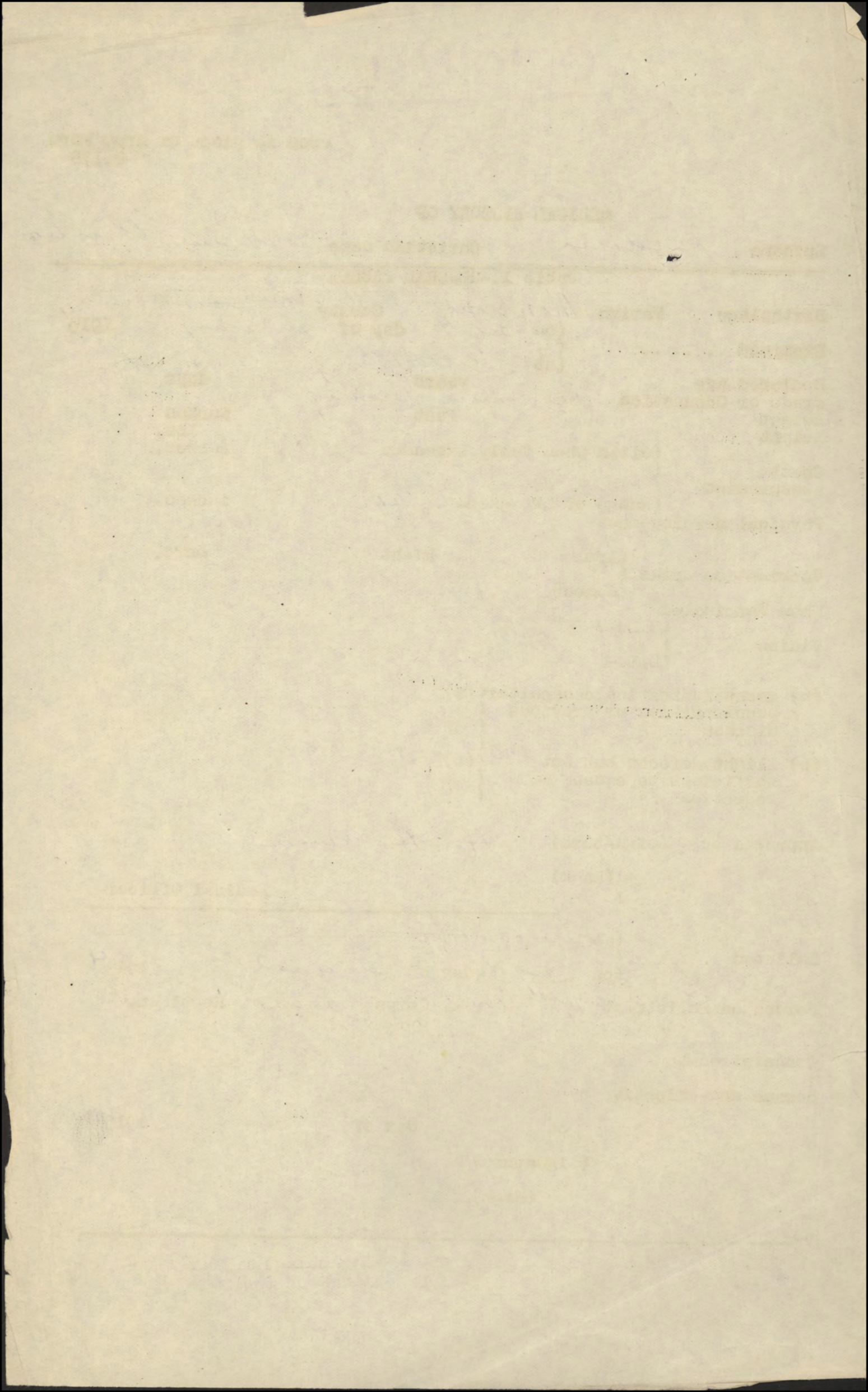
Approved by (Signature) H. H. Owen
(Rank) _____
medical Officer

Enlisted { (at Valcartier
{ (on 29th day of August, 1915⁴

Joined on Enlistment 17th Batt Corps 46621 Regtl no.

Transferred to
Became non-effective by
on _____ day of _____ 1915
(Signature)
(Rank)

Entries in Red Ink made from
Attestation Sheets.



LIST No.	F.		
29.	Australian Hosp. Boulogne.	31-3-15	nasal growth. ✓
33	Australian Hosp. Boulogne.	7-4-15	nasal growth (Trans. to Convalescent-camp no 1)
72.	No. 3. Gen. Base Hqts.	23/5/15	Nasal growth ✓
179	2 nd Can. Fld Amb.	7-10-15	Defective eyesight ✓
"	" " "	8-10-15	" " To Duty.
189	#4 Stat. St. Omer	27/10/15	Defective vision
201	" " " "	10-11-15	" " Disch. to Duty
234 (2)	Mil. Fulham	26-12-15	cerebro contact.
63	Fulham Mil. St. Dunstan's Rd. Hammermill	6-1-16	"Meningococcus" ^{As per list: 66 (C.P.R.O. Lab)} not stated Disch to duty. (C.P.R. Off. Dts. Lond. resp. list.)
241	Mil. Fulham	6-1-16	cerebro contact. Disch. to Duty.
A 270	Reported from Base	6-1-16	cerebro contact ^{secret} rejoined
102. x	Fulham Mil. Hammermill	26-12-15	barrier of Meningococcus.

NAME

Jardine William, Thornton

H. Q. FILE No. 649-

46621

REG'L. No.

46567

RANK AND CORPS

Plt. 15th Battalion

CABLE

NO.

DATE

NATURE OF CASUALTY

NO.

196

X FOLL X

NAME

Jardine William Horburn

H. Q. FILE NO. 649-~~46567~~
old No. 46621

RANK AND CORPS

C 15-Batt. (Form 17th)

FOLLOWS

No.

CABLE

No.

DATE

NATURE OF CASUALTY

FOLLOWS

0881

16-9-16

Killed in action Sept. 7th 1916.AFB 2090^AField
13-9-16Killed in action, in the field, * Sept 7th 1916 * (France)

LIST No

HOSPITAL

DATE OF
ADMISSION

REMARKS

2444

Rep from Base.

7-9-16

Killed in action

MARRIED OR SINGLE

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN

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.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
<i>Killed in action</i>	<i>7.9.16</i>	<i>C.L.A. 4. 18.9.1</i>

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS					
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1		2		3	
			\$	C.			\$	C.			\$	C.				NO.	DATE	NO.	DATE	NO.	DATE
<i>Apr</i>																					
<i>1-30</i>	<i>30</i>	<i>1-</i>	<i>30</i>		<i>30</i>	<i>10</i>	<i>3</i>	<i>-</i>													
<i>May</i>																					
<i>1-31</i>	<i>31</i>		<i>31</i>		<i>31</i>		<i>3</i>	<i>10</i>													
<i>June</i>																					
<i>1-30</i>	<i>30</i>		<i>30</i>		<i>30</i>		<i>3</i>	<i>-</i>													
<i>July</i>																					
<i>1-31</i>	<i>31</i>		<i>31</i>		<i>31</i>		<i>3</i>	<i>10</i>													
<i>Aug</i>																					
<i>1-31</i>	<i>31</i>		<i>31</i>		<i>31</i>		<i>3</i>	<i>10</i>													
<i>Sept</i>																					
<i>1-7</i>	<i>7</i>	<i>100</i>	<i>7</i>	<i>-</i>	<i>7</i>	<i>10</i>	<i>7</i>	<i>0</i>													

Checked *C. Meyer*

O.E.B. Mar/17
" " Apr/17

Bal on left to N.E. Beck.
175 175

Cash found in effects *K.R.*

Statement of
MAR 7 1917
Account rendered

EFFECTIVE DATE		AUTHORITY
7.9.16	C. 444	
18.9.16		

REG'L. NO. 46561 RANK Pte.

NAME *Jardine W J* Cha 444
 UNIT 15th Bn. TRANSFERRED TO Non. Eff DATE 7.10.16 AUTHORITY 18.9

IF IN PERMT. CORPS
 WHAT UNIT

PERMANENT FORCE ALLOWANCES

TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION

TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION *Sept 22-14*

TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$ ~~18.00~~ ^{20.00} DATE EFFECTIVE *May 1-16*

PAYABLE TO *M^{rs} R. L. Jardine, 2063 Clutchison St. Montreal Quebec* RELATIONSHIP



ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *19.9.16* EFFECTIVE *1.10.16* REASON *Killed in action 7.9.16*

DISCHARGE DATE AND PLACE REASON AND AUTHORITY *Cha 444 18.9.16*

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

QUITTANCE ROLLS						CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
2	3		4		1	2	3	4	CREDIT				DEBIT				
No.	DATE	No.	DATE	No.	DATE												
									253 50		545 41	29 -					
						2 61			18		20 61	41 39					
						2 55											
						3 41	3 41		20		29 37	46 12					
							3 41		20		23 41	55 71					
						2 55	3 49		20	5 -	31 04	58 77					20 th fine drunk Hs #8 17 th Bn. 1.1.1915.
						2 62	3 48		20		26 10	66 77					
						2 61			20		22 61	51 86					Trans. Non Eff. 8.9.16 Cha 444 18.9.16.
									271 50			51 86					
												53 61					
						53 61					53 61						Cr. 17 th C.I. & S. Sch 527. 53 61 To Ottawa for Sett. 30/4/17

Statement of
 APR 18 1917
 Account rendered

V
SURNAME.*Jardine,*

649-J-1586.

CARD No.

CHRISTIAN NAMES

William Thorburn

FOLL.

D

REGL. No.

~~46621~~
~~46561~~

RANK

Pte.

UNIT

~~17th~~ ~~15th~~*Bn.*

FORMER CORPS

R. A. C.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Jardine, Mrs. Ellen J.

RELATIONSHIP TO SOLDIER

X ADDRESS

*2063 Hutchinson St.
Montreal, P. Q.*

COUNTRY OF BIRTH

Canada. Montreal

DATE

PLACE OF ATTESTATION

Lidworth, Eng.

DATE

Jan. 26 - 1915.

MARRIED

yes.

SINGLE

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE

Name **Jardine W.T.** Rank **Pte.**Reg. No. **46621**Unit **15th. Battn.**Next of Kin **Canada,***25. J. 454*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
	7-9-16. Killed in Action.			A444.	O.881.	18/9

Number

46621

Rank

Pte.

Surname

JARDINE

Christian Name

William Thorburn

Units

15th Bn. Canadian

Theatre of War

France

Date of Service

15-2-15

Remarks

Latest Address

Mrs. R. L. Jardine (m.)

2063 Hutchison St.

Roll No.

Montreal, P.Q.

200m.-2-21.M.

B. Page 13473.

DESP. SEP 22 1922
E.G.N. No. 213467

649-J-1586

H.A.G.

JARDINE, Pte. W. T. #46621 - 15th Bn

E lig. for 14-15 Star. Pk. 15th Bn

Med & D

(Mother)

Mrs. R. L. Jardine
2063 Hutcheson St.,
Montreal, P.Q.

P & S (Mother)

See above

(Serial no. 787393.)

Mem Cross (Mother)

See above

Scroll Date MAR 7 - 1921 Key No 225801

Plaque Date JAN 11 1922 Key No P24344

86

Desp 21-10-20 (m) @ 27536

414

M

Name Jardine W.T. Rank Pte.

Reg. No. 46621.

Unit Can. Pay & Record Office Details London. (15th. Batt.)

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1915.						
Dec 26	Fulham Mil. Hos.	Hammersmith.	Meningococcus.	102.		ER
1916						
Jan. 6	Discharged.		N.S.	63.	ER.	Q.
	Casualty now reported	"Meningococcus.		66.		

Surname **Jardine.** Christian Name or Names **W. T.** Reg. No. **46621.**
 Rank **Pte.** Unit **Can. Pay & Records. Lon.** Co. Troop Batty.
 Hospital **Fulham Mil. Hammersmith.** Date of Admission **26. 12. 15**

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

Not stated.

(1) Later Diagnosis (if changed)

Meningococcus Carrier

(2)

(3)

Additional Diagnoses: If more than one state present

Killed in Action 4.9.16
Rept from Base.

DISPOSITION

Dis. to duty:-

Date

6-1-16.

REMARKS

C.L. 10-1-16. 63.

C.L. N 19-1-16 66

C.L. 25. 3. 16. 102

18.9.16 A.444.

A.M.D. 2 DEPT.
Beh. of D.G.M.S. O.M.F.C. London.

J. M. W. M.
AR

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

NAME JARDINE

? W. J. Pte

Regimental No. 46561
46621

Name and address of next-of-kin

Unit 15th 17th Battalion

Mrs. Y. Jardine

Date of enlistment Aug 29th

1544 Mance Street Montreal

Place of Birth Canada

Married (yes or no) No

12⁵⁰ stopped 18-15

Date and place discharged 7-9-16

Amount of pay assigned monthly \$

100-14-15 #
raised to 25.00
May 1-16

Reason for discharge K. i. a.

To whom payable Mrs R. L. Jardine
2063 Hutchison St
Montreal Que.

Character on discharge CLA 444
18-9-16



Statement of
PR 13 1917
Account rendered

Statement of
MAR 7 1917
Account rendered

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					
Nov 1	Nov 21	21	1.00	21 00	21	.10	2 10	23 10			33 90			33 90		
- 22	- 30	9	1.10	9 90	9	.	90	10 80							Prom. to Cpl. Nov. 22.	
Dec 1	Dec 10	10	1.10	11 00	10	.	1 00	12 00								
Dec 11	Dec 31	21	1.00	21 00	21	.	2 10	23 10	25 10		17 60	12 50		30 10	Reduced to Private Dec 11 th	
Jan 1	Jan 31	31	1.00	31 00	31	.	3 10	34 10	5 00		15 00	25		40 00	Trans 15 th Batt Jan 31 st imo.	
Feb 1	28	28	.	28	28	.	2 80	30 80						90	Assigned pay change Nov 20 Jan	
Mar 1	31	31	1.00	31	31	.	3 10	33 80	30 80		14			14		
Apr 1	30	30	.	30	30	.	3	33 80	50 90			18		18		
May 1	31	31	.	31	31	.	3 10	36 90	65 90		15	18		33		
June 1	30	30	.	30	30	.	3	39 90	67 100		6	18		24		
July 1	31	31	.	31	31	.	3 10	42 10	76 110 10		42	18		60		
								50 10			143 50					Settled.
								3 81								Exchange.
Aug 1	31	31	1.00	31	31	.10	3 10	53 91	88 01		2 92	18		90 21 82	-90 4 over Cr. May	
Sept 1	30	30	1.00	30	30	.10	3 00	66 19	49 19		8 16	18		26 16		
Oct 1	31	31	1.00	31	31	.10	3 10	73 03	107 13		21 12	18		39 12		
Nov 1	30	30	1.00	30	30	.10	3 00	68 01	101 01		5 30	18		23 30		
Dec 1	31	31	1.00	31	31	.10	3 10	77 71	111 81		59 18	18		77 18		
								34 63								
				427 90			42 60	3 81	474 31		240 18	109 50		439 68		

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						
Jan.	1-31	31	1 ⁰⁰	427 90	31	10	4260	381	474	31	240	18	117 50	439 68		
				31			310	34 63	68	73			15			
Feb	1-29	29	1 ⁰⁰	29	29	10	290	50 73	82	63	113	4 18	30 80	60 14	28 days TP. B D G	
Mar.	1-31	31	1 ⁰⁰	31	31	10	310	2249	56	59	9	59 18		27 59		
								29 00								
				518 90				51 70	381	574	41	261	11 253 50	30 80	545 41	

29 ✓

Checked *CUM*

Cash found in effects *K.R.*

BALANCE TRANSFERRED TO NEW LEDGER.

SEPARATION ALLOWANCE

'OVERSEAS CONTINGENTS

Sheet No. 2.

Miss Ellen Jardine

PAYMENTS.

Name of Soldier

*Jardine, William**Private*

L. L. Job 89002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	<i>L 33</i>	<i>20</i>	<i>20</i>
May		<i>D 1033</i>	<i>20</i>	<i>20</i>
June		<i>R 7575</i>	<i>20</i>	<i>20</i>
July		<i>N 10016</i>	<i>20</i>	<i>20</i>
Aug.		<i>Q 12697</i>	<i>20</i>	<i>20</i>
Sept.		<i>P 16436</i>	<i>20</i>	<i>20</i>
Oct.		<i>W 19652</i>	<i>20</i>	<i>20</i>
Nov.		<i>B 22631</i>	<i>20</i>	<i>20</i>
Dec.		<i>B 26173</i>	<i>20</i>	<i>20</i>
Jan.	1917			<i>300</i> <i>Account closed previous</i> <i>granted 8-9-16 77. 290</i>
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

ACCOUNT CLOSED

DATE.....PER.....*W*

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

SEPARATION ALLOWANCE 96Name *Jardine Ellen Mrs*
Address *2063. Hutchison St.**Montreal*
*PQ*Relation to Soldier
wife, child or mother} *mother*Name of Soldier *Jardine William*
Regtl. No.Rank *Private*Corps *Can. Auto. Machine Gun*

To what Corps belonging

when called out

} *mother*

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>See letter Oct. 12. 1915 from C. P. Fund Montreal</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.		<i>H 16020</i>	<i>20</i>	
Nov.		<i>A 15104</i>	<i>20</i>	
Dec.		<i>B 17859</i>	<i>20</i>	<i>20</i>
Jan.	1916	<i>C 17980</i>	<i>20</i>	<i>20</i>
Feb.		<i>D 17495</i>	<i>20</i>	<i>20</i>
March		<i>E 18266</i>	<i>20</i>	<i>20</i>

ACCOUNT CLOSED
DATE..... PER *W*

Name

Address

Relation to decedent

Who, if any, is to receive

Handwritten notes:
 10/15/64
 10/15/64
 10/15/64

Age

Sex

Race

Color

Height

Weight

Build

Hair

Eyes

Complexion

Birth date

Place of birth

Parents

Education

Occupation

Marital status

Number of children

Signature

Date

Initials

RECEIVED

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

379

M. F. W. 12a.
 60m.-12-15.
 1772-39-819.

Wm R. L. Jardine

Name of Soldier *Jardine Wm*
46561

Sheet No. 2.

PAYMENTS.

L. L. Job 89002.-Req. 6213.

Month.	Year.	Cheque No.	Amt.
April	1916	<i>D 641</i>	<i>18 -</i>
May		<i>E 7573</i>	<i>25 18</i>
June		<i>W 9098</i>	<i>25</i>
July		<i>K 12100</i>	<i>10</i>
Aug.		<i>W 13842</i>	<i>20</i>
Sept.		<i>W 15315</i>	<i>20</i>
Oct.		<i>I 18383</i>	<i>20</i>
Nov.			
Dec.			
Jan.	1917		
Feb.			
March			
April			
May			
June			
July			
Aug.			
Sept.			
Oct.			
Nov.			
Dec.			
Jan.	1918		
Feb.			
March			
April			
May			
June			
July			

£20.36

\$20.00 From May 1st. 16. 2nd 19/7/16
\$18.00
 Remarks. *D. M. G. B.*

\$25.00 from May 1st. /16
Remained Aug 11 /16. = M. Apr. 18/16
10.00 July to adjust.
20.00 August. returns 1/16

Stop 1/10/16, 27x 20 1/16 each. 22 1/16
Filed in action

Pension granted Oct 12/16
Sept - 1/16

Cancellation

406.8.2x. O.A.B. 5/6/17.

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.				

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

378

appt. cheque to go to old address
M

To Whom *Mrs. R.L. Jardine,*

By Whom Assigned *Jardine, Wm J.*

Address ~~1544 Prince St.,~~
2063 Hutchison St
Montreal, Que.
Montreal.

Regtl. No. *46561*

Rank *Pte.*

Corps *A. M. S. B.*

Rate \$ ~~18.00~~ *from Apr 1/15*
~~12.00~~ *from May 1/15*
20.00 from 1st. May 1915
per month
284 19/576 gm

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>Consolidated</i>
Sept.				
Oct.		<i>7787</i>	<i>12</i>	
Nov.		<i>H 1015</i>	<i>12</i>	
Dec.		<i>97759</i>	<i>12 ⁰⁰/₁₀₀</i>	
Jan.	1915	<i>3351</i>	<i>12</i>	
Feb.		<i>84388</i>	<i>12</i>	
March		<i>46513</i>	<i>12</i>	
Apl.		<i>66896</i>	<i>18</i>	<i>18⁰⁰ aff future cheques.</i>
May		<i>A 9126</i>	<i>18</i>	
June		<i>J 4410</i>	<i>18</i>	
July		<i>25384</i>	<i>18</i>	
Aug.		<i>H 12263</i>	<i>18</i>	
Sept.		<i>513678</i>	<i>18</i>	
Oct.		<i>#12995</i>	<i>18</i>	
Nov.		<i>D 15758</i>	<i>18</i>	
Dec.		<i>C 16060</i>	<i>18</i>	
Jan.	1916	<i>B 16830</i>	<i>18</i>	
Feb.		<i>A 19029</i>	<i>18</i>	<i>casualty Fed.</i>
March		<i>A 10619</i>	<i>18</i>	

16-11-1954

16

16

6
088

Register No. Df 89

WAR SERVICE GRATUITY
TO
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. 9479 ~~7~~ 5

Reg't No. 465'61 Name Wm. Shoburn Jardine
(Christian Name) (Surname)
Unit 15 Bn Rank Pte Date of enlistment
Date of casualty 7/9/16 B.P.C. File No. 7.628
Was service performed overseas? yes

DEPENDENT

Name Mrs Ellen F. Jardine Relationship w. mother
Address 2063 Hutchinson St.,
Montreal

Amount of Special Pension Bonus \$ Nil Abstracted by M. Wilson

Eligible for Gratuity \$ 180.-
Less amount of Special Pension Bonus paid \$ Nil
Less Debit Balance of S. A. or A.P. \$ ✓
Total deductions \$ Nil
Balance due \$ 180.00

Cheque No. 9,189,2185 ✓ Date issued 19-7-20 Wes

REMARKS :
.....
.....
.....
.....

Clerk J. Patterson

Audited by
[Signature]
Date 17.7.20

\$180

M.F.W. 2652
25M-6-20.
H.Q. 1772-89-1473

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname

Christian Name

Regimental Number

Rank

Address (in full)

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Rates:—Regimental pay \$ _____ per diem; Field Allowance \$ _____ per diem. Separation Allowance \$ _____ per month.

L.L. 53961—M. & D. 5721

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

Remarks:

M. F. W. 127
 3003M-1-19
 1772-93-1140