ARMSTRONG, ~~WILNER~~ JAMES
Wilmer

B55797

Arm INF (Pfb) Coy. F.

ATTESTATION

NON-PERMANENT ACTIVE MILITIA OF CANADA

UNIT UNIVERSITY OF TORONTO CONT. C.O.T.C. REGTL. No. B 420191

1. Surname? (Block letters) A R M S T R O N G
2. Christian names? Wilmer James
3. Present address? ~~Caven House, Victoria College~~ 997 Spadina Ave
   Phone No. ~~KI. 8184~~ KI 0798
4. Date of Birth?* 10 Feb. 1919
5. British subject? Yes
6. Occupation? Student
7. Religion? United
8. Next of Kin R.W. Armstrong
9. Relationship? Father
   Address Merrickville, Ontario
10. Previous Naval, Military or Air Force Service 1 Year T.C. Bn., 2 years High School Cadet
    (Give particulars, qualifications, etc.)

CERTIFICATE OF MEDICAL EXAMINATION

Height 6' 1" Weight 155 Chest max 37 min 34

Descriptive marks A1

I have examined the above named man in accordance with instructions laid down in Instructions for the R.C.A.M.C. and C.D.C. 1937 Appendix V and find him fit Category A1

Date Oct. 16/41 Signature J. H. Inglebellum Major, R.C.A.M.C. (R).

DECLARATION TO BE MADE ON ATTESTATION

I, the undersigned ARMSTRONG, Wilmer James do sincerely and solemnly declare that to the best of my knowledge and belief, the above answers (made by me) to the foregoing questions are true; that I am willing to be attested for the term of three years or until legally discharged, and do understand the nature and terms of this engagement, that I will safeguard all clothing, arms and equipment issued to me and will return same when required, and that I will report any change in address of myself, or my next of kin to my Commanding Officer.

OATH TO BE TAKEN

I, ARMSTRONG, Wilmer James do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

L. Andrews — Signature of Witness

W. J. Armstrong — Signature of Man

Dated this 16th day of Oct. 1941 at Toronto

CERTIFICATE OF ATTESTING OFFICER

The recruit above-named was cautioned by me that if he made any false answers to any of the above questions he would be liable to be punished by law. 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 and replied to, and the said recruit has made and signed the declaration and taken the oath.

H. C. Mercer

Signature of Magistrate, Justice of Peace, or Attesting Officer

Capt.

M.F.B. 235d
300M—8-40 (6536)
H.Q. 1772-39-1545

*To be shown day, month, year—Example:—25-8-39.

Statement of Services

Promotions, Reductions, Transfers, Casualties, Annual Training, Qualification Certificates, etc.	Effective Date	Authority for Entry	Signatures of Officers Certifying Correctness of entries
Accepted for Service with effect from.....	16-10-41	Pc II	E D Madill Lt.-Col. ..... Officer Commanding
.....		DO. 84/41	Unit U. of T. C. O. T. C.
Qualified Syllabus "B"	21-3-42	D.O.690/42.	D Rogers (Lieut)
" Syllabus "C" (I.R. ARM)	22-3-42	D.O.690/42.	D Rogers
" Practical (..... ARM)			
" 2/Lieut. (R. F.) (..... ARM)			
SOS 33rd Quota	6-11-42	WII 91/42	D Rogers Capt
Completed 18/15 days trng. L. H. Q. 1941-42		Paylist	D. A. McIver
Completed 15 days trng. Camp 1942			Lieut
Medals and Decorations			

NOTE.—These entries are to be made from time to time as they occur and certified by the Officer making the entry.

Attestations to be made out in duplicate, the original being forwarded to be filed in Regimental Orderly Room, the duplicate to be kept in the Battery, Squadron, Company, etc

Statement of Services

Promotions, Reductions, Transfers, Casualties, Annual Training, Qualification Certificates, etc.	Effective Date	Authority for Entry	Signatures of Officers Certifying Correctness of entries
Accepted for Service with effect from.....			..... Officer Commanding Unit.....
Failed Syllabus "B"	Dec 41.		D Ryan
		Lieut.	
Killed in action in Holland with Lincs. & Well. R.	26 Jan 1945		

NOTE.—These entries are to be made from time to time as they occur and certified by the Officer making the entry.

Attestations to be made out in duplicate, the original being forwarded to be filed in Regimental Orderly Room, the duplicate to be kept in the Battery, Squadron, Company, etc.

Statement of Services

Promotions, Reductions, Transfers, Casualties, Annual Training, Qualification Certificates, etc.	Effective Date	Authority for Entry	Signatures of Officers Certifying Correctness of entries
Accepted for Service with effect from.....			..... Officer Commanding
.....			Unit.....

NOTE.—These entries are to be made from time to time as they occur and certified by the Officer making the entry.

Attestations to be made out in duplicate, the original being forwarded to be filed in Regimental Orderly Room, the duplicate to be kept in the Battery, Squadron, Company, etc.

Received.....Checked.....Card.....Observations.....

WSG COMPLETED

ORIGINAL
DUPLICATE
~~TRIPLICATE~~

M.F.M. 2
A.F.B. 271
500M—7-41 (1131)
H.Q. 1772-39-1645

(To be completed in triplicate. Copy designation to be shown by striking out terms not applicable.)

No. ~~2 District Depot (AF) D Wing~~ C.I.C. Cadet

Unit ~~Algonquin Regt.~~ Regimental Number B 55797

MM279 Completed NOV 20 1942

ACTIVE FORMATIONS AND UNITS OF THE CANADIAN ARMY

ATTESTATION PAPER

C.A.A.

FINGERPRINTED

1. Surname ARMSTRONG
2. Christian Names Wilmer James
3. Present address 697 Spadina Avenue, Toronto, Ontario, Canada.
4. Date of birth 10 February 1919
5. Place of birth Canada (Country) Quebec (County or Province) Montreal (Town or Township)
6. Religion (state denomination) United Church
7. Trade or Calling ~~Journalist~~ Newspaper man
8. Married, Widower or Single ~~Single~~ Married
9. Name of next of kin ~~Rinaldo William ARMSTRONG~~ (SEE CHANGE) Mrs. Dorothy Annette ARMSTRONG (SEE CHANGE)
10. Relationship ~~Father~~ Wife
11. Address of next of kin See change Merrickville, Ontario, Canada (SEE CHANGE) (SEE CHANGE)
12. Do you belong to, or have you served in a Reserve Formation or Unit of The Canadian Army? Yes
    U. of T. Contingent C.O.T.C. 16 Oct. 41 to present (If Yes, Give Unit and Dates of Service)
13. Have you served in (*a*) an Active Formation or Unit of The Canadian Army? No (Yes or No)
    No (If Yes, Give Regimental No. and Unit) (*b*) Any other Naval, Military, or Air Force? No (Yes or No) (If Yes, specify Unit and Period of Service)
14. Did you serve during the Great War 1914-1918?
    No (If Yes, specify Regimental No., Unit and Dates of Service)

DECLARATION TO BE MADE BY MAN ON ATTESTATION

I, Wilmer James ARMSTRONG, do solemnly declare that the above particulars are true, and I hereby engage to serve in any Active Formation or Unit of The Canadian Army so long as an emergency, i.e., war, invasion, riot or insurrection, real or apprehended, exists, and for the period of demobilization after said emergency ceases to exist, and in any event for a period of not less than one year, provided His Majesty should so require my services.

Witness:- [illegible]

Date ~~XXXXXXXXXXXXXXXX~~ 6th November 1942

W J Armstrong (Signature of recruit)

OATH TO BE TAKEN BY MAN ON ATTESTATION

I, Wilmer James ARMSTRONG do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

W J Armstrong (Signature of Recruit)

CERTIFICATE OF MAGISTRATE, JUSTICE OF THE PEACE OR ATTESTING OFFICER

The Recruit above-named was cautioned by me that if he made any false answers to any of the above questions he would be liable to be punished as provided by law.

The above questions and answers 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 Toronto Ontario Canada this 6th day of ~~October~~ November 1942

Thos. Doran (Signature of Magistrate, Justice or Attesting Officer.)

for O.C. No.2.D.D. Capt (Officer or Rank and Unit or appointment)

~~for D.R.S.~~ Captain

BG

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT

O.H.F. COMPLETED

5303

Record of Service of ARMSTRONG (Surname) WILMER JAMES (Christian Names) Regimental Number B55792

QUALIFICATIONS

Military: Qual. Syl. B & C. Mar. 42

Business or Professional: ~~Journalist~~ Newspaperman

Trade or Civil: Miner

Technical: nil

Languages: English

EDUCATIONAL QUALIFICATIONS

High School or Collegiate: 7 ~~xxx~~ years (years completed)

Graduation or Matriculation: Senior Matric. (specify)

*College: Victoria College 4 years

*University: University of Toronto - B.A.

*(Name of institution, courses or years completed, and degrees obtained to be shown)

All enlisted personnel will be taken on as Private soldiers, appointments and promotions to higher rank to be shown as provided in the space below.

Report: Date	Report: From whom received	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc., from date taken on Strength of Canadian Army. (Active)	Rank Shown	Effective Date	Unit	Place	Authority: Part II D.O. No. Cas. List, etc.	Authority: Dated
		Joined on appointment T.O.S. NO.2 District Depot CA(A)	Cadet	6-11-42	Alg.Regt. D.Wing	Toronto	Pt.11 D.O. 269A	11.11.42
		Proceeded on co mand to A-17 M.G. T.C. Three Rivers, Quebec.	Cadet	12.11.42	" 2 D.D.	Toronto	D.O. 269A	11.11.42
		Having been posted for qualifications is attached to O.T.C. Wing, Three Rivers, P.Q., f.a.p. incl. pay.	"	13-11-42	OTC A17	3 Rivers	D O 291	30-11-42
		Issued T.W. No. A.301903	"	23 DEC 42	"	"	D O 312	19 DEC 42.
		Ceases to be attached f.a.p. incl. pay from No.2 DD on attachment f.a.p. incl. pay to 0.3 OTC, Three Rivers, Que.	"	28 FEB 43	OTC A17	"	D O 56	28 FEB 43
		Attached f.a.p. incl. pay on ceasing to be attached to A.17 CMGTC, 3 RIVERS, Qué.	"	1-3-43	0.3 OTC	"	D O 12	15-3-43
		Granted one month's convalescent leave from 15 Feb 43 to 15 Mar 43, Under R.O. 609 (6)	"	15 Feb 43	"	"	D O 5	6 Mar 43
		Having successfully completed his course and having been recommended for promotion and appointment to the rank of 2nd Lieut. (Inf. R.O in the Canadian Army (A) is hereby pending promulgation of such appointment in CARO, granted the provisional rank of 2/Lieut.	2/Lieut.	15 May 43	"	"	D O 65	15 May 43
		Ceases to be attached f.a.p. incl. pay and is S.O.S. of his Unit on transfer to A.10 CITC, Camp Borden, Ont.	"	~~15~~ 20 May 43	"	"	D O 69	~~15~~ 20 May 43
		TOS on transfer from 0.3. OTC, Three Rivers, Quebec. as reinforcement	2/Lieut.	21-5-43	A.10 CITC	C. BORDEN	DO PT II NO. 125	27-5-43

For additional entries use M.F.M. 1 and 2 (a)

Regimental No. ..... Rank 2/Lieut. ..... Sheet No. .....

M.F.M. 1 & 2 (a)
300M—1-43 (8255)
H.Q. 1772-39-1646

Name ARMSTRONG W.J.

Record of Promotions, Reductions, Transfers, Casualties, Reports, etc.—	Rank Shown	Effective Date	Unit	Place	Authority D.O. Number	Authority Dated
Qualified and promoted to the rank of Lieut.(Inf)(R) Canadian Army Newmarket	Lieut.	19-6-43	A.10 CITC	C.BORDEN	152	28-6-43
Granted permission to marry Miss Dorothy Annette Brown on 17 July 43	Lieut.	17-7-43	A.10 CITC	C.BORDEN	170	19-7-43
On Command and Att. f.a.p. to No.23 B.T.C. ~~Brantford~~ Ontario	Lieut.	23-7-43	A.10 CITC	C.BORDEN	175	24-7-43
Att'd to #23 BTC f.a.p. incl pay from A-10 Camp Borden	do	24 Jul 43	#23 BTC	Newmarket	178	28 Jul 43
Granted leave and Rat. allow. from 16 Aug 43 to 29 Aug 43 incl.	do		do	do	195	17 Aug 43
Was married at Midland, Ontario on 14 Aug 43 to Miss Dorothy Annette BROWN	do	14 Aug 43	do	do	207	31 Aug 43
see change Change of ~~Ch~~ of ~~Ch~~ of ~~Ch~~: to Mrs. ~~Dorothy Annette ARMSTRONG, Midland, Ontario~~	do		do	do	206	30 Aug 43
Change added 7 Jan 44 Qualified as Driver Class III (Tracked)	do	21 Jul 43	A.10 CITC	C.BORDEN	174	23 Jul 43
Qualified as Driver Class III (excluding motorcycles)	do	16 Sep 43	#23 BTC	Newmarket	228	24 Sep 43
Ceases to be att'd to #23 BTC f.a.p. incl pay to A-10 Camp Borden	do	19 Oct 43	do	do	249	19 Oct 43
Ceases to be On Command and attached for all purposes to No.23 CA(B)TC Newmarket, Ontario on return to Unit	Lieut.	20-10-43	A.10 CITC	C.BORDEN	250	20-10-43
S.O.S.on transfer to O.T.C. Brockville, Ontario	Lieut.	19-11-43	A.10 CITC	C.BORDEN	276	19-11-43
Attached to the OTC (EC) for all purposes and posted to the Refresher Wing.	Lt.	20-11-43	OTC	Brockville	D.O. 282	25-11-43
Ceases to be att. O.T.C. and is SOS A-10 CITC. ON TRANS. TO CDN. ARMY OVERSEAS Serial # 294B.	Lieut	12 Dec 43	OTC 01	Brockville	C 297	12 Dec 43
ATT NO 1 TRANSIT CAMP		4.12.43	#1 TRANSIT	WINDSOR, N.S.	316	15.12.43
SOS NO 1 TRANSIT CAMP		22.12.43	#1 TRANSIT	WINDSOR, N.S.	321	22.12.43
		23.12.43	#1 TRANSIT	WINDSOR, N.S.	323	23.12.43
SOS CDN ARMY (CANADA)	Lieut	~~23~~ 23 Dec 43				
TOS CDN ARMY (O/S) ON TRANSFER	"	24 Dec 43	3 CIRU	UK	5	7 Jan 44
DISEMBARKED IN U.K. Reinf for ALQR	"	5 Jan 44				
TOS 3 CDN INF REINF UNIT	"	6 Jan 44			22C/1264	28 Jan 44
Adm Bamford		6 Jan 44				
Adm B. Adm Glen		10 Jan 44				

Regimental No..... Rank..... Sheet No.....

M.F.M. 1 & 2 (a)
306M—1-43 (8255)
H.Q. 1772-39-1646

Name.....

Record of Promotions, Reductions, Transfers, Casualties, Reports, etc.—	Rank Shown	Effective Date	Unit	Place	Authority D.O. Number	Authority Dated
(C2) S.O.S S.O.S to L&W. Spec. Inc.	Lieut	29 Jan 44	3 C I Rn	U.K	25	31 Jan 44
(C2) T.O.S T.O.S from 3 C I Rn.	Lieut	30 Jan 44	L&W (S.I)	U.K	9	11 Feb 44
(C2) Disch. from 13 Gen Hosp.		21 Jan 44		Ch.	C.C. 127.	3 Feb 44
(C2) S.O.S S.O.S to Reinf Inc.	Lieut	8 Mar 44	L&W (S.I)	U.K	14	24 Mar 44
(C2) T.O.S T.O.S from Special Inc.	Lieut	9 Mar 44	L&W. (R.I)	U.K	14	24 Mar 44
Change address N/K ~~To Mrs Dorothy Annette Armstrong (wife) 22 Dalton Rd Toronto Ontario~~			L&WR		15.	31 Mar 44
CH3 S.O.S S.O.S. to L&W. Rgt.	Lieut	31 Mar 44	L&W. (R.I.)	U.K	16	14 Apr 44
T.O.S.						
Embarked at UK on 20 July 44						
D042/14 Sept 44 .. Disembarked at France on 23 July 44	Lieut	23 July 44	L&W Rgt	21 A Gp	33.	30 July 44
Wounded	Lieut	4 Aug 44		AEF	A-478	
Adm to British Hospital	Lieut	26 Nov 43			Ch 'B'	
Disch from British Hospital	Lieut	16 Dec 43			Ch 'B'	June 44
(C95) Error ~~Wounded Adm 130 Sep 7~~	~~Lieut~~	~~13 Aug 44~~	~~CFS Vat 19~~	~~UK~~	~~26~~	~~18 Aug 44~~
Adm. 7 Bn Gen Hosp.		2 Jan 44.				
Disch 7 Bn. Gen Hosp.		6 Jan 44.				
Wounded		10 Sep 44		AEF	A491	
Admit 8 Gen Hosp.		11 Sept 44.	L&W. Rgt	CL.	B.299.	6 Oct 44
~~Sent 3 C I Rn. VS. Ambl. 1228. At S.A.S.~~	~~Lieut~~	~~3 Oct 44~~	~~3 C I Rn~~	~~UK~~	~~23A~~	~~4 Oct 44~~
~~T.O.S. from 3. C.I.R.U~~	~~Lieut~~	~~4 Oct 44~~	~~3 C I R.U.~~	~~AF~~		
~~Sent to list 13 C I R U on Completing Admitted Ambl 1228~~	~~Lieut~~	~~27 Nov 44~~	~~13 C I R U~~	~~UK~~	~~24A~~	~~27 Nov 44~~
~~Cancel A.T. Ambl 1228. Set. A.W.40.~~	~~Lieut~~	~~27 Nov 44~~	~~3 C I R U~~	~~UK.~~	~~263~~	~~4 Nov 44~~
Disch 8 Gen Hosp.	Lieut	15 Sept 44	L&W. Rgt	CL.	B.301.	9 Oct 44
S.O.S. X-4 List 13 Bn. IF. L&W. Rgt.	Lieut	24 Oct 44	L&W Rgt	21 A Gp	52.	3 Nov 44
T.O.S from X-4 list 13 Bn L&W Rgt.	Lieut	25 Oct 44	L&W Rgt	21 A Gp.	53	4 Nov 44
Change address N/K - DOROTHY ANNETTE ARMSTRONG (WIFE) 31 BROOKMOUNT ROAD TORONTO, ONT, CANADA			L&WR	21 A Gp	58	2 Dec 44

Regimental No. ..... Rank Lieut. ..... Sheet No. .....

MFM 1 & 2a
40/P & S/119 (4398)

Name Wilmer James Armstrong

	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc—	Rank Shown	Effective Date	Unit	Place	Authority DO Number	Authority Dated
208d	~~17 Feb 45. LOS. to x 6 List~~	~~Lieut~~	~~26 Jan 45~~	~~L & H.R.~~	~~21 A Gp.~~	~~4~~	~~10 Feb 45~~
m.d.	✓ Missing. (Third Casualty.)	Lieut.	26 Jan 45.	L & H.R.	A. 538.		2. Feb 45.
	Killed	Lieut.	26 Jan 45	L & W.R.	C.L.A. 540	26 Jan 45	
SOS	SOS Deceased. Killed in action	Lieut.	26 Jan 45	L & W.R.	21 Agp	8.	17 Feb 45

CERTIFICATE OF MEDICAL EXAMINATION

Name in full Wilmer James ARMSTRONG Place Toronto

Place Toronto Date Oct. 8/42

Part 1. Information obtained from the recruit.

1. Age 23 2. Have you ever suffered from any of the following diseases?

a. Rheumatism NO
b. Tuberculosis or pleurisy NO
c. Bronchitis or asthma NO
d. Heart disease NO
e. Kidney or bladder disease NO
f. Stomach or bowel trouble NO
g. Rupture NO
h. Varicose veins NO
i. Foot trouble NO
j. Nasal trouble NO
k. Ear disease NO
l. Eye disease NO
m. Fits NO
n. Nervous or mental disease NO
o. Syphilis NO
p. Gonorrhoea NO
q. Have you ever worn glasses? ~~YES for~~ 3 yrs.
r. Are you now or have you in the past received disability pension or compensation? If so, give details NO

W J Armstrong
Signature of Applicant.

Part 2. Information obtained by medical examination. **THE RECRUIT MUST BE STRIPPED**

1. Identification marks or scars. (If operative obtain history).

Birthmark to right of umbilicus--transverse.

2. Height 5 feet 11 inches. 3. Weight 156½ pounds.
4. Complexion Dark Eyes Brown Hair Black 5. Development Good ~~Fair~~ ~~Poor~~
6. Chest measurement—Girth on full expansion 39 inches.
Range of expansion 4 inches.
7. Vision, right 20/20 left 20/20
With Glasses— right left 8. Hearing, right WV 20 left WV 20
9. Condition of mouth and teeth Fair
10. The abnormalities (congenital and pathological) found on examination are as follows
Urine--Neg. Ears--Normal Reflexes--Present.
Streptococcic cellulitis rt. arm following injury Feb. 1940.
Hospital 8 days. No disability results.

No. 3221
X-RAY OF CHEST NEGATIVE

Part 3. We, the examiners, find no evidence of the diseases mentioned in Question 2, Part 1, except as reported in the remarks. We have examined the Recruit in accordance with the pamphlet "Physical Standards and Instructions for the medical examination of recruits" and he is found fit for Category A

Special remarks when category lower than A

President MAJOR R.C.A.M.C. Member MAJOR R.C.A.M.C. Member

mr

VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief details and signature	Date	Brief details and signature
	S.P. VACC.		
11-11-42	T.A.B.T. 1	NOV - 4 1943	YOB P U L H E M S: 19 1 1 1 1 1 1 1
12-12-42	T.A.B.T. 2		
5 Feb. 43	T.A.B.T. 3		
12 FEB 43	M 713 3271 - "D" for 1 mo.	28-11-43	YOB P U L H E M S: 19 1 1 1 1 1 1 1

Regtl. No. ..... Rank ..... Surname ARMSTRONG ..... Christian Name WILLMER JAMES

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			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.	Signature of Medical Officer
		Day	Month	Year	Day	Month	Year				
THREE RIVERS	12-11-42	2	1	43	28	1	43	Fractured fibula left 1721	26	Coteau Barracks Military Hospital	[illegible]

For additional entries use M.F.M. 1 and 2 (b)

SERVICE AND CASUALTY FORM

PART I (For all ranks)

M.F.M. 4 (Part I)
A.F.B. 103 (Part I)
150M—3-42 (3885)
H.Q. 1772-39-1649

Unit Cdn Inf Corps No. 2 D.D. Regimental Number

1. Surname ARMSTRONG
2. Christian Names WILLMER JAMES
3. *Substantive Rank and Appointment
   *Acting Temporary or Local Rank 19-6-43 Lieut
   giving date
   *To be entered in pencil to facilitate alteration.
4. Place of birth MONTREAL QUE. CANADA.
5. Date of birth as declared on attestation 10 FEB 1919
   (A)
6. Date of enlistment 6 NOV 1942
7. Place of enlistment TORONTO ONT. CANADA
8. Residence at time of enlistment 297 Spadina Ave. Toronto,
9. (B) Special conditions (if any) of enlistment or rate of pay
10. (C) Any subsequent variations of conditions of service
11. Religion UNITED CHURCH
12. If married, state date 14-8-43
13. Trade on enlistment NEWS PAPER MAN
14. Corps, trade and grade
15. (D) Qualifications
16. (E) Miscellaneous entries

(17) Regiment or Corps: Cdn Inf Corps
Unit (Battn., etc): Alg R. LINC & WELLD REGT.

(18) Medical

Category	Date	Authority
"A"	8-10-42	M.F.M.2.
"D"	12-2-43	M.F.B. 227 (for 1 month)
		28 Nov 43

YEAR OF BIRTH	P	U	L	H	E	M	S
19	1	1	1	1	1	1	1

(19) Next of kin (entries to be made in pencil)
Mrs. Dorothy Annette Armstrong (wife)
31 Brookmount Rd.
Toronto, Ontario, Canada

(20) E.
(21) E. D058/44
(22) E.

NOTES—
(A) Here enter particulars of any subsequent claim as to actual age after verification of birth certificate.
(B) Whether for home service only, enlisted at special rates of pay, etc.
(C) If to be retained on home service, period if specified to be stated; also authority and on what grounds: see (A) above.
(D) Signaller, Farrier, etc.
(E) Instructions regarding allotment of these sub-heads will be made as may be necessary after mobilization.

(a) Report: Date	(a) Report: From whom received	(b) Unit	(c) Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.) in accordance with para. 2 of Note to Table I of Appendix III of Field Service Regulations, Volume I	(d) Place of Casualty	(e) Date of Casualty	(f) Army rank as at (e)	(g) Army Form or other authority for entry to be shown
		3 CIRU	SOS CDN ARMY (CANADA)	UK	23 Dec 43		
		"	TOS CDN ARMY (O/S) ON TRANSFER	"	24 Dec 43	Lieut	5-7 Jan 44
		"	DISEMBARKED IN U.K.	"	5 Jan 44		
		"	TOS 3 CDN INF REINF UNIT	"	6 Jan 44		
S.O.S.		3CIRU	SOS to K&W Regt Ft Unit (Spec Inc)	UK	29 Jan 44	Lieut	25-31 Jan 44
24Jan44	99/29/L&W/1	L&WR	TOS from 3 CIRU	Field	30Jan44	Lieut	7 - 11 Feb 44
17Mar44	EA2C/6497	"	SOS to LINC & WELLD REGT RFT INC	"	8Mar44	"	14 - 24 Mar 44
"	"	"	TOS from SPECIAL INCREMENT (RI)	"	9Mar 44	"	14 - 24 Mar 44
2Apr44	CR	"	(RI) SOS to LINC & WEDLD REGT Auth-EA2/6229 d/31Mar44	"	31Mar44	"	16 - 7 Apr 44
2Apr44	"	L&WR	TOS from RFT INCREMENT Auth-EA2/6229 d/31Mar44	"	1Apr44	Lt	16 - 7 Apr 44
12 MAY 44	CR	"	Awarded Canadian Volunteer Service Medal and Clasp	"	6 MAY 44	"	23 - 26 MAY 44
			Emb U.K. 20 JUL				
			Disemb France 25 JUL 44				DO 33-30 Jul 44
11SEP44	CR Ser 63	L&WR	SOS to X-3 LIST (L&WR)	Field	9SEP44	Lt	44 - SEP 44
19Sep44	X3	L&WR	TOS from Linc & Welld R	"	10Sep44	"	36/44
X4	11 Bn	✓	Posted from X3 List	✓	16 Sep	✓	39 Sep
X4	L&W	11 Bn	Posted to X3 list	✓	20 ✓	✓	40 Sep 44
16 Oct 44	X3	L&WR	Posted to X4 13 Bn	Eng	5 Oct 44	Lieut	47/44
X4	13 Bn	L&WR	SOS to Linc & Welld Regt	Bel.	24 Oct 44	Lieut	58/44
25OCT44	CR Ser 85	L&WR	TOS from X4 LIST (13 BN) L&WR	Field	25OCT44	Lt	53 - NOV 44
~~28Jan45~~	~~CR 146~~	~~"~~	~~SOS to X6 LIST (L&WR) Missing in action~~ Cancelled	~~"~~	~~26JAN45~~	~~"~~	~~7 d/Feb 45~~ 8 d/Feb 45
~~3013/215 d/2Feb45~~	~~X6 list~~	~~L&WR~~	~~TOS X6 list (L&WR)~~		~~27Jan45~~	~~✓~~	~~12 d/Feb 45~~ Cancelled DO 15 d/Feb 45
3013/220 d/8 Feb 45		L&WR	SOS Deceased Killed in action	Field	26 Jan 45	Lt	8 d/Feb 45

NR

HOSPITALIZATION ONLY

SOS To X3
HIST 9 Sep 44

SERVICE AND CASUALTY FORM

M.F.M.4 (a) (Part II)
40/P & S/412 (3006)

(PART II)

Regiment or Corps ... L + W. Regt ... Regimental Number ...

Substantive Rank ... Lieut ... Surname ARMSTRONG ... Christian Names W. J.

Acting Temporary or Local Rank ...
(To be entered in pencil to facilitate alteration)

(a) Report		(b)	(c)	(d)	(e)	(f)	(g)
Date	From whom received	Unit	Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.) in accordance with para. 2 of Note to Table I of Appendix III of Field Service Regulations, Volume I	Place of Casualty	Date of Casualty	Army rank as at (e)	Army Form or other authority for entry shown
11 aug 44	3013/66	L+W Regt.	Wounded (Remained on Duty.	Sd	4 aug 4	Lieut	units

NO DEPENDENTS.
ASSIGNMENT $6.50 TO SISTER.

UNITED CHURCH.
10TH FEBRUARY, 1919.

M.F.M. 5
150M—1-42 (3165)
H.Q. 1772-39-1651

PARTICULARS OF FAMILY OF AN OFFICER OR OTHER RANK OF THE CANADIAN ARMY (AF) OR R.C.A.F. (ON ACTIVE SERVICE)

INSTRUCTIONS.

(*a*) This form is to be completed immediately an officer or other rank is appointed to, or enlisted in, the Canadian Army (AF) or R.C.A.F. ON ACTIVE SERVICE.

(*b*) All questions, etc., must be completed.

(*c*) Upon completion, the form will, in the case of Army personnel, be forwarded to the District Records Officer for transmission to Officer i/c Records (Army) N.D.H.Q., Ottawa. In the case of R.C.A.F. personnel the form will be forwarded to R.C.A.F. Records Officer, Dept. of National Defence for Air, Ottawa.

---

(1) Name of Officer or Other Rank ARMSTRONG,
(Surname first—Christian names in full—Block capitals)
Wilmer James

(2) Regimental or Official Number and Rank B-55797 Cadet

(3) Unit No 2 District Depot C.A.(A) ALGONQUIN REGIMENT "D" WING

(4) Are you married? No

(5) If married, state,

(*a*) Full name of your wife THIS MAN

(*b*) Present postal address of wife BEING

(6) If married, have you been regularly supporting your wife? If not—state reasons
SINGLE

(7) Are you a widower? QUESTIONS

(8) Have you any children? Number of boys Girls

Names and ages (5) to (9)
INCLUSIVE

(9) If Dependents' Allowance is claimed in respect of children—state whether you have been regularly supporting them ARE NOT

Give particulars of Guardians to whom Dependents' Allowance should be paid—if authorized.

Name APPLICABLE.

Postal Address

[SEE OTHER SIDE]

RECORDS N. D. 2

(10) Have you a common-law wife—whom you have been regularly supporting and publicly representing as your wife for at least 2 years immediately prior to appointment or enlistment? NO

If so, state her full name and Postal Address

NA

(11) Is your father alive? YES

If so, state name and address, occupation Rinaldo William ARMSTRONG

Merrickville, Ontario, Canada. (MINISTER)

(12) If your father is a widower and is totally incapacitated from earning a living—are you his sole or partial support? NO NA

(13) If sole or partial support of father who is a widower, totally incapacitated from earning a living —state what amount per month you have given him prior to appointment or enlistment

XNA NA

Also state reason he has no other means of support if partially supported by you, what is your reason for not providing full support? NA

(14) Is your mother alive? YES

If so, state name and address Mary Maude ARMSTRONG

Merrickville Ontario, Canada.

(15) If your mother is a widow, are you her sole or partial support? NO

(16) If sole or partial support of widowed mother—state what amount per month you have given her prior to appointment or enlistment NA

Also state reason why she has no other means of support, if partially supported by you what is your reason for not providing full support? NA

(17) Are you contributing to the support of any dependents, other than those shown above? NO
This may include any brothers 16 years of age or under, or any sisters 17 years of age or under, solely supported and maintained as bona fide members of your household before your appointment or enlistment.

If so, state the following particulars:—

Relationship NA

Full Name NA

Postal Address NA

Amount contributed monthly during the past six months NA

(18) Are you insured? YES

If so, in what Company? Mutual Life Insurance Co. Prudential Life. Ins.
(Give number of policy)

Have you made arrangements for payment of your Insurance Premium? YES
If not, and it is a monthly premium, you may assign the amount in addition to any other assignment you wish to make, provided the total assignment is not in excess of the maximum monthly amount which may be assigned.

I hereby certify that the information given by me on this form is correct in each and every particular.

W. J. Armstrong
(Signature of officer or man)

Date 6th November 1942

for Leo Doran, Capt.
Officer Commanding No. 2 DISTRICT DEPOT C. A. (A)

Date 6th November 1942

N.B. (If parent(s) of the officer or other rank concerned has (have) been replaced by foster parent(s), questions relating to fathers and/or mothers above should be altered and answered as applicable.)

OCCUPATIONAL HISTORY FORM

THIS FORM IS TO BE COMPLETED FOR EACH MEMBER OF THE ARMED FORCES. THE INFORMATION SOUGHT IS FOR THE USE OF GENERAL ADVISORY COMMITTEE ON DEMOBILIZATION AND REHABILITATION, A COMMITTEE SET UP BY THE GOVERNMENT OF CANADA TO STUDY PLANS FOR ESTABLISHING IN INDUSTRIAL LIFE THE MEMBERS OF THE ARMED FORCES, AFTER DISCHARGE. ACCURACY AND COMPLETENESS IN ANSWERING WILL BE OF MUCH HELP TO THE COMMITTEE.

PLEASE READ CAREFULLY THE INSTRUCTIONS GIVEN ON THE INSIDE OF COVER BEFORE COMPLETING FORM

PLEASE LEAVE BLANK

Section A—GENERAL INFORMATION

1. (a) Print name in full: ARMSTRONG, WILMER JAMES (b) Reg'l. No.: C. 55 707
2. (a) Arm of service: Army (b) Unit: Algon. Regt. (c) Rank: Cadet
3. (a) Date of birth: Feb. 1919 (b) Have you any dependents? No (c) Place of residence at time of enlistment: Toronto Ont.
4. (a) Place of enlistment: Toronto Canada (b) Date of enlistment: 6-11-42.

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school: 23½ (b) Were you attending school or college up to the time of enlistment? No.
6. State definitely highest standing reached at public, technical or high school (for instance—"4 years, Public School", "two years, High School", "Junior Matriculation", or "4 years technical course in printing", etc.): JR + SR MATRIC.
7. If you attended a university, give name of university and standing or degree secured: Victoria College, University of Toronto.
8. (a) Did you ever enter upon a trade apprenticeship? No (b) If so, for what occupation? No (c) Did you finish it? No (d) If you did not finish it, how long did you serve at it? No.
9. (a) What languages do you speak fluently? English. (b) What languages do you read well? English.

Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

10. (a) State whether you were WORKING or NOT WORKING at time of enlistment. (Enter here only "Working" or "Not Working", as case may be; particulars are asked for below): NOT WORKING. (b) At time of enlistment of what trade union or professional society were you a member? None.

Section D—PARTICULARS CONCERNING THOSE WHO WERE UNEMPLOYED AT TIME OF ENLISTMENT

QUESTIONS 11 TO 17 REFER ONLY TO THOSE WHO ANSWER "NOT WORKING" IN QUESTION 10 (a)

11. Had you ever been employed fairly regularly since leaving school?
12. (a) If answer to 11 be "Yes", state exact trade or occupation at which you actually worked (b) State how long you had worked at this trade or occupation
13. If answer to 11 be "No", state exact trade or occupation for which you feel qualified
14. If you had been employed after leaving school, state when you last worked fairly regularly before enlistment
15. Give details of last employer, if any: Name Address
16. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.)
17. (a) If your last employment was in a business of your own, state nature and address of business (b) Date of discontinuing it

Section E—PARTICULARS CONCERNING THOSE WHO WERE EMPLOYED AT TIME OF ENLISTMENT

QUESTIONS 18 TO 23 REFER ONLY TO THOSE WHO ANSWER "WORKING" IN QUESTION 10 (a). PLEASE READ THESE QUESTIONS AND REPLY TO THOSE APPLYING TO YOU AT TIME OF ENLISTMENT

IF YOU WERE AN EMPLOYEE WORKING FOR AN EMPLOYER UP TO THE TIME OF ENLISTMENT, PLEASE ANSWER QUESTIONS 18 TO 21

18. Name of employer: Canadian Press Address: 44 Victoria St. Toronto
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.): News Service.
20. (a) Your specific occupation: Newspaper man. (b) Number of years' experience at this occupation with any employer
21. (a) Did your employer promise definitely to give you employment on discharge? No (b) Did your employer refuse to promise you employment on discharge? No (c) Do you wish to return to your former employment? No

IF YOU WERE WORKING ON YOUR OWN UP TO THE TIME OF ENLISTMENT, THAT IS TO SAY, OPERATING A FARM, A STORE, AN AGENCY, OR IN PROFESSIONAL PRACTICE, OR AS A PARTNER IN ANY SUCH LINE, PLEASE ANSWER QUESTIONS 22 AND 23

22. (a) State nature of business, or professional practice (b) Where was it located?
23. (a) Number of years engaged in this business (b) Have you made, or will you make plans to return to the same or a similar business on discharge?

Section F—PARTICULARS OF FARMING EXPERIENCE

24. (a) Do you wish to engage in farming after the war? No (b) Do you feel competent to operate a farm? Yes (c) If so, in what kind of farming? Dairy
25. (a) Were you born on a farm? No (b) How many years' actual farming experience have you had? 1½ (c) In what provinces did you have experience? Ontario & Que.

Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge? No
27. If so, state nature of your plans (for example, do you plan to return to school, or have you been assured of a job, etc.) No.
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form: Would like to University to have M.A. Degree

DATE 6—11—1942 SIGNATURE W. J. Armstrong

10

APPLICATION FOR PERMISSION TO MARRY

(One copy only to be completed)

NOTE: Study the notes on page 2 before completing this application.

Date 14 JUL 43 194

1. I, Lieut. Armstrong, W.J.
(Number) (Rank) (Surname) (Initials)
Algonquin Regiment hereby apply for permission to
(Unit)
marry Dorothy Annette Brown of
(Proposed wife's name in full)
Midland, Ontario
(Proposed wife's address in full)

2. I certify that the following particulars concerning myself and my proposed wife are true:—

(*a*) PARTICULARS OF SOLDIER:

(i) Date of birth 10 FEB 19

(ii) Date of enlistment 6 NOV 42

(iii) In receipt of tradesmen's rates, Class

(iv) Marital Status (Strike out words inapplicable)—Soldier to initial:

Bachelor.
~~Widower.~~ WJA
Name of deceased wife n/a
Date of death of deceased wife n/a

~~Divorced~~ WJA
(*See* para. (5) of Routine Order and note on page 2 of this application, number (vi).)

Name of former wife n/a
Date of divorce decree n/a
Place where divorce granted n/a

(v) Particulars of dependents in receipt of Dependents' Allowance, if any:
Name (or names) of dependents n/a

Relationship of dependents n/a

Amount of Dependents' Allowance n/a
Amount of assigned pay $20.00 per month to sister, Margaret.
How, and by whom, dependents will be supported after marriage
by father, R.W. Armstrong

(*b*) PARTICULARS OF PROPOSED WIFE:

(i) Date and place of birth Midland, Ontario, 10 MAR 20.

(ii) How long you have known her since 13 DEC 40

(iii) Present nationality Canadian

(iv) Name and address of nearest relative Mrs. I.K. Brown,
Midland, Ontario

M.F.M. 228
25M—9-42 (6110)
H.Q. 1772-39-1950

3. I solemnly state that I am a backelor
(Bachelor, Widower, or Divorced Person)

as set out in para. 2 (*a*) of this application, and that I am legally free to marry

Dorothy Annette Brown
(Name of proposed wife)

W. J. Armstrong
(Signature of applicant)

NOTES: (i) A certificate of the proposed wife's good character, signed by a responsible citizen, such as a clergyman, public official, school teacher or employer, must be attached to the application.

(ii) If the proposed wife is under the age of 18 years, the written consent of her parent or guardian must be attached to the application.

(iii) If the applicant is under the age of 19 years, the written consent of his parent or guardian must be attached to the application.

---

4. DECISION OF COMMANDING OFFICER

Permission to marry granted

(See note at para. (vii) below)

Date 17 Jul 43 Signature G Mitchell Lt Col

for Commanding A10 CITC

NOTES FOR ATTENTION OF COMMANDING OFFICERS

5. (i) After permission to marry has been published, this form will be forwarded, through the usual channels, to the Officer i/c Records, National Defence Headquarters, Ottawa, Ontario.

(ii) Attention is drawn to the Routine Order covering the subject of "Permission to Marry", viz: No. 2242.

(iii) The requirements of this form are for military purposes only. The parties to the proposed marriage (particularly when either one or both of them are under the age of 21 years) should consult a local solicitor, or other competent authority, upon the requirements necessary to conform to the civil laws of the country or province where the marriage takes place.

(iv) Where permission to marry is granted, such permission will not apply to a marriage to any person other than the woman whose name is given in para. 1 of this application.

(v) In the case of personnel declaring they have been divorced, the Commanding Officer will require them to produce the original divorce judgment, or a certified court copy thereof, before permission to marry may be granted.

(vi) The Part II Order showing that permission has been granted will include the name of the proposed wife.

(vii) In case of refusal for permission to marry, reasons will be stated by the Commanding Officer, in his own handwriting, in para. 4 above.

C. 6 A469

TO BE COMPLETED IN DUPLICATE

Read this whole Form and Instructions on other side before commencing to complete.

MF M10
40/P & S/423 (3767) 3/18B

WILL

(1) I, WILMER JAMES ARMSTRONG, of the VILLAGE
(Names in Full) (City, Town, Village, Township)

Address in civil life.

of MERRICKVILLE, in the County ~~District~~ of GRENVILLE,

Province of ONTARIO, NEWSPAPERMAN
(Civil Occupation)

Regimental No. Lieut, Unit LINCOLN & WELLAND REGT., do hereby revoke all former Wills by me made and declare this to be my LAST WILL.

Relationship, names and address of beneficiaries, and what each is to receive.

(2) I GIVE, DEVISE AND BEQUEATH unto MY WIFE

DOROTHY ANNETTE ARMSTRONG,

MIDLAND, ONTARIO, ALL MY ESTATE.

Original Received
N.D.H.Q. MAY 10 1944
DR220

Relationship, names and address of residuary beneficiaries.

(3) I ~~GIVE, DEVISE AND BEQUEATH all the rest and residue of my estate, both real and personal, of whatsoever kind and wheresoever situate unto~~ WD

(4) I appoint RINALDO WILLIAM ARMSTRONG, MERRICKVILLE, ONTARIO
(Name) (Address)

CLERGYMAN, to be the Executor ~~Executrix~~ of this my Last Will.
(Civil Occupation)

IN WITNESS WHEREOF I have hereunto set my hand this 25th day of May 1944.

Signed and acknowledged by the Testator as and for his last will in the presence of us present at the same time who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as witnesses.

W J Armstrong, Lieut.
(Signature of soldier)

First witness sign here.

(5) Signature J. G. Baldwin
Civil Address 86 Devonshire Ave., London, Ont.
Civil Occupation

Second witness sign here.

Signature G. U. Giles
Civil Address 205 River Road Niagara Falls, Ontario Canada
Civil Occupation School Teacher

(Witnesses are not to be beneficiaries.)

[OVER]

Duplicate

NOTE

If you have already made your Will, do not fill in this Will, but mark on the front where your Will can be located or with whom it is deposited.

(1) Example: I, John Charles Jones, of the City of Marlowe, in the County of Carleton, Province of Ontario, Mechanic, Regimental No. 1234, Royal Blankshire Regiment.

(2) If only **one** beneficiary for all your estate, complete as example: "my wife, Mary Jones of 26 Cherry Ave., Ottawa, Ont., all my estate," in which event, strike out clause (3) entirely.

If **more than one** beneficiary, set out in clause (2) what each is to receive, such as

"my wife, Mary Jones, 26 Cherry Ave., Ottawa, Ont., $.....00, and my household goods and effects,"

"my brother, Thomas Jones, 80 Yonge St., Toronto, Ont., $.....00,"

"my sister, Margaret Jones, 80 Yonge St., Toronto, Ont., $.....00,"

"my friend, John Smith, 60 LaSalle St., Winnipeg, Man., $.....00,"

and any personal gift, if desired. Then complete clause (3) as to the balance of your estate.

(3) If balance of estate is to one person, complete as example: "my wife, Mary Jones, 26 Cherry Ave., Ottawa, Ont." Another example: "my father, Jack Jones, and mother, Jessie Jones, 80 Yonge St., Toronto Ont., equally," or as desired.

(4) Fill in name of Executor or Executrix, example: "John Doe, 24 Smith Street, Blankville, Ontario, Salesman," or, if Executrix, "Jane Doe" and address. A beneficiary under the Will may be appointed Executor or Executrix. It is preferable that the person appointed as Executor should not be on, or likely to be on, Active Service.

(5) The soldier will date the Will and sign same. Two witnesses must sign in the presence of the soldier, and each witness should fill in his or her full civil address and occupation. No one who is a beneficiary shall act as a witness. It is preferable, though not essential, that the witnesses be persons not on Active Service.
When completed, leave Will (both copies) with Commanding Officer for transmission to the Records Office for safe custody.

00/05

ESTATES BRANCH
MAY 9 1945
H. Q.
OTTAWA
NATIONAL DEFENCE

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION

NUMBER

RANK Lieutenant

SERVICE UNIT Linc. & Welland Regt. (C.A.)

NAME ARMSTRONG, Wilmer James

DATE OF BIRTH

DAY 10th MONTH February YEAR 1919 Date enlisted: 6-11-42

MARITAL STATUS

Married Religion: United Church

NEXT OF KIN AS SHOWN ON M.F.M. 1, 2 & 5 RELATIONSHIP Wife

NAME Mrs. Dorothy A. Armstrong,

ADDRESS 31 Brookmount Rd., Toronto, Ont.

ADDRESS D.A.B.

ADDITIONAL PERSON TO BE NOTIFIED

ADDRESS

PARENTS NAME

ADDRESS (IF SOLDIER MARRIED OVERSEAS)

AUTHORITY CAS. SIG. NO. 6030A H.Q.SSB-07-256

CASUALTY DETAILS

DATE

Previously reported missing now officially reported killed in action. 26-1-45

FRANCE

LAST WILL ATTACHED TO NOTIFICATION TO A. OF E.? JMD YES/NO

M.F.M.5. ATTACHED TO NOTIFICATION TO A. OF E.? YES/NO

DATE 15-

Gd. 6

COPY FOR DOCUMENT FILE

Additional Notes by Unit M.O. and Field Ambulance.

Morphia—	A.T. Serum—
Dose. Time and date given— 1/2L	Dose and date given— 1500 units Sept. 10/44
Date of Wound or onset of illness } 10 Sept	Religion— Ag 25 Vnc.

Sulphanilamide. Dose in grammes. Time and date given.

Disease*	Microscopic Diagnosis*			
Malaria	B.T.	M.T.	Q.	Clin.
Dysentry	B. Ex.	Ehyst.	Indef. Ex.	

Malaria Treatment							
Days	1	2	3	4	5	6	7
Ateb. grms.							
Quin. grs.							

NOTES.

H. Wounds. Perf. left Arm
Lodging Bullet chest
CCP 1015 –
Dressings checked. Bandaging

* Strike out where inapplicable.

2318

Army Form W3118.
R.A.F. Form 3118.
Naval Form M204.

FIELD MEDICAL CARD.

*No. Rank LIEUT.
Name ARMSTRONG W. S.
Unit L+W. Regt.
*In cases of Enemy Prisoners of War serial number allotted by A.F.W. 3000.

Battle Casualty. ~~Accidentally Wounded.~~ ~~Sick.~~
(*Strike out description which does not apply.*)

Diagnosis of Unit M.O.— ~~GSW (Arm)~~ Shell Wound HE EA
9 Sept 44 @ 1900 hrs. Left chest Pos + (Perf)
Rt Arm. (Pen)

Date seen by him— 10 Sept 44 A. D. McL (CAPT)

No. of Field Ambulance— 15th C. Fd Amb. Cgt.
Date of admission— Sept. 10/44.
Field Ambulance diagnosis—
(9 Chs. 7 D.S.) S.W. (H.E.) LT. ARM. LT CHEST EA.

12 F.D.S., ~~C.C.S.~~ ~~or M.C.S.~~ diagnosis (if altered from above)— 1400 Sept. 10
As above + Lt W. Lewin Maj.

General or other Hospital diagnosis (alterations or additions)—

Wt. 53183/1306. 1,000m. 4/43. D.P.W. 51-6600.

Date of Admission to F.D.S., C.C.S., M.C.S., or General or other Hospital and designation of medical unit to which admitted must be recorded hereunder immediately on admission. Brief clinical notes should be added later, dated and signed by the M.O.

9 Cdn. F.D.S — 10 Sept. 44.
Wounded 2100 hrs last nite.
by H. E. Sharpnell.
Condition good.
Dressings O.K.
Evac. to CCS. [illegible]
Capt.

ADM TO 3 CDN OCS
HRS 2100 DATE 10 Sept
A-D No 210 CAS LIST

Evac to Hosp. [illegible]

This F.M. Card must not be destroyed. It must be transmitted with the patient if he is evacuated to U.K. Temperature charts or additional clinical notes may be sent with it, either in the same or in another envelope attached to the patient.

NO..... Rank Lieutenant Name ARMSTRONG, Wilmer James

Unit L. & W. Regt. Date of death 26th Jan., 1945.

Died at ~~France~~ Holland

Cause Killed in action

Death occurred on strength of Forces H.Q. 332-97-256

N/K Mrs. Dorothy A. Armstrong Relashionship Widow

Address 53 Walder Ave., ~~31 Brookmount Rd.~~, Toronto, Ont.

Remains buried in Holland 'S Hertogenbosch 4 CAD Cem Cemetery
Sheet 11 SW MR 320480.

Grave location

CHK

OVER-

BURIAL REPORT TO N.K. AUG 16 1946

RETURN TO BUR. OF STAT. DEC 20 1945

ROYAL MESSAGE DESP'D. FEB 22 1945

CAN. MESSAGE DESP'D. FEB 26 1945

Temp BR sent to NK & Map

REBURIAL

Nijmegen Canadian Military Cemetery,
4 miles S.E. of Nijmegen, Holland.

Grave 11, row C, plot 16.

HI & CR Form Despd. OCT 5 1946

Photographs Despatched MAR 20 1948

10M-1-45 (M-4608)

B.55797 SOS

NAME ARMSTRONG, WILMER JAMES H.Q. File 332-97-256

RANK ~~CADET~~ ~~P/2Lt~~ LT

ACTIVE UNIT ALQ. R. (PR) No 2 D.D.

RESERVE UNIT

Appt. R.O. No. 3787 Date 6-11-43 Effective date of Appt. 15-5-43

CANADA GAZETTE

TRANSFERS, PROMOTIONS and REVERSIONS

TRANS. TO A.10 T.C., (PR) ALQ. R. 21-5-43 & TO BE LT., A.10 T.C. (REINF) ALQ. R. 19-6-43. R.O. 3787, 6-10-43

EMBARKED CANADA - SAILING LIST No. 3464 DEC 23 1943

PREV. REPORTED MISSING NOW OFFICIALLY REPORTED KILLED IN ACTION 26 JAN 45

10M—6-43 (519)
H.Q. 1772-45-8

LINCOLN & WELLAND REGT. FRANCE CABLE # 6030A 15 FEB 45