

C.E.F. REGIMENTAL DOCUMENTS

NAME.....BLACK.....JACK.....A.....

...REGT. No. 126209

UNIT 71 BN

...H. Q. FILE No. 21506

.....
BY **H**

[illegible]

Box # 775

OPEN

Acid

Original
ATTESTATION PAPER.

Original
No. 26209

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your name?..... Jack A. Black
2. In what Town, Township or Parish, and in what Country were you born?..... Owen Sound, Ont. Canada
3. What is the name of your next-of kin?..... John Black
4. What is the address of your next-of-kin?..... R. R. # 2, St. Marys, Ont.
5. What is the date of your birth?..... Mar. 4, 1895
6. What is your Trade or Calling?..... Machinist
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?.. No
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement?..... Yes
12. Are you willing to be attested to serve in the } Yes
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

Jack A. Black (Signature of Man.)

Ray C. Morrow (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Jack A. Black, 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.

Jack A. Black (Signature of Recruit)

Date Sept. 7th 1915 Ray C. Morrow (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Jack A. Black, 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.

Jack A. Black (Signature of Recruit)

Date Sept. 7th 1915 Ray C. Morrow (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 Stratford this 7th day of Sept. 1915.

Thomas Delaney (Signature of Justice)

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

Thomas Delaney (Approving Officer)

Description of Jack A. Black on Enlistment.Apparent Age 20 years 6 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer).

Height 5 ft. 4 ins.Chest measurement { Girth when fully expanded 36½ ins.
Range of expansion 2½ ins.Complexion mediumEyes blueHair dark brownReligious denominations. { Church of England
Presbyterian yes
~~Wesleyan~~ Methodist
Baptist or Congregationalist
Other Protestants
(Denomination to be stated.)
Roman Catholic
Jewish*Scar middle of forehead
Scar left side upper lip*

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

I consider him* fit for the Canadian Over-Seas Expeditionary Force.Date Sept. 7th 1915.Place Stratford, Ont.*J. P. Rankin, M.D.
14.9.28 1 Regt.*
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.

Jack A. Black 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.*A. W. M. G. G. G.* (Signature of Officer)Date Sept 7th 1915.*O.C. 71st Battalion**C.E. 2*

126209. Pte J.A. Black. 2nd L.M.R.

- 22 -

If page 20 with Military Will is removed, state
on this page to whom it has been forwarded and
date:—

126209

Pte J.A. Black.

~~7th Battalion C.E.F.~~
B.C. 2nd C.M.R.

In the event of my
death I give the whole
of my property and
effects to my mother.

Mrs John Black.

St Marys.

R.R. #2. Ontario Can.

Pte J.A. Black.

~~7th Battalion~~
2nd C.M.R.
June 3rd 1916

2050 The Black and H A

MEDICAL HISTORY SHEET.

No Card CR 466
126209

Surname Black Christian Name Percy J. A.

Examined { on 7 day of Sept 1915
at Stratford Ont.

Approved by J. P. Raman

Birthplace { City or Town Queen's Landing
County Grey Ont.

Rank Major M.O.

Apparent age 20

Trade or occupation Machinist

Height 5 Feet 4 Inches.

Weight 142 Lbs.

Chest measurement { Minimum 34 inches.

{ Maximum expansion 36 1/2 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm. Right. Left.
Number One

When Vaccinated last Did not take 3 3/16

(a) Marks indicating congenital peculiarities or previous disease None

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

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

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

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>18 10/15</u>		M.O.
<u>30 10/15</u>		M.O.
		M.O.

Enlisted on 7 day of Sept 1915 at Stratford Ont

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>71st Os Bn</u>	<u>126209</u>		<u>Sept 7/15</u>
	<u>74th Bn. C.E.F.</u>	<u>126209</u>		<u>28-5-1916</u>
Transferred to..	<u>Proceeded Overseas</u>			<u>June 8/1916</u>
	<u>for Service with</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.

Christian Name.

ackd

[illegible]

TLH. Rank Name **BLACK Jack A.** Reg'l No. **126209.**

Unit **71st. Battn.** If in perm. Corps, }
What Unit? }

Married or Single **Single.**

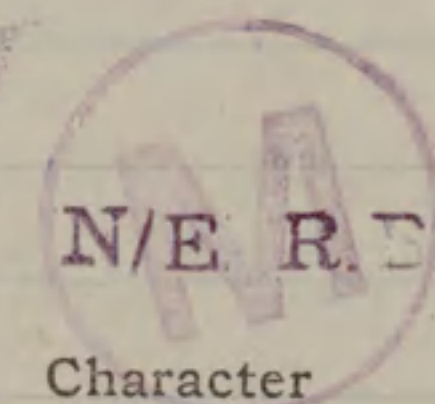
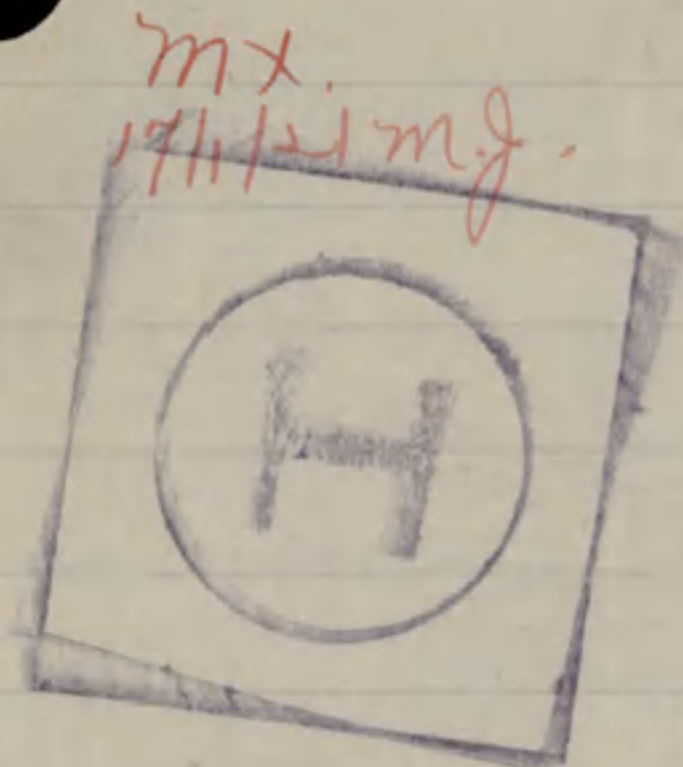
Place and Date of Enlistment **Stratford, Sept. 7th. 1915.** Place of Birth **Owen Sound, Ontario.**

Name and Address, Next-of-Kin **John Black,**
R.R. #2, St. Mary's, Ont. Canada. Relationship

Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

Discharge, Date and Place **At 25-B-2145'** Reason Character



Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
Date.	From whom received.				
		<i>Arrived in England</i>		<i>11 APR 1916</i>	
<i>29/5/16</i>	<i>do 4th Bn</i>	<i>Trans to 4th Battalion</i>		<i>25/5/16</i>	<i>Auth 4th C.O. 388.</i>
<i>5.6.16.</i>	<i>74 Bn.</i>	<i>Taken on strength & posted to B. Co. from 28.5.16 on Trans. from 71st Bn. C.S.F.</i>	<i>Bramshott.</i>	<i>28/5/16</i>	<i>Pl. II 118. Auth. 4th C.O. 388. 28/5/16.</i>
<i>9.6.16.</i>	<i>-</i>	<i>Embarked for France</i>	<i>-</i>	<i>8.6.16.</i>	<i>- 122.</i>
<i>14.6.16</i>	<i>2nd Bn. C.S.F.</i>	<i>Trans. to 2nd C.M.R.</i>	<i>-</i>	<i>9.6.16</i>	<i>-</i>
<i>6.10.16</i>	<i>do</i>	<i>South Midland Cas. & Caring Station</i>	<i>Died.</i>	<i>-</i>	<i>24.</i>
<i>2.10.16</i>	<i>"</i>	<i>Died of Wounds.</i>		<i>25.9.16</i>	<i>Ch 4 274 Not Stated</i>
				<i>25.9.16</i>	<i>and Pl II 0 6'3</i>

[illegible]

B. Can
Base

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

Casualty Form—Active Service.

NOTIFIED CORRESPONDENT
Canadian Record Office,
250M-1-18,
H. Q. 1772-89-929.
Hillbank, S.W.

Unit, Regiment or Corps

71st Overseas Battalion, C. E. F.

Regimental No. 126209

Rank Pte

Name

Black, Jack Allison

Enlisted (a) 7/9/15

Terms of Service (a)

Duration of War
6 months after

Service reckons from (a)

7/9/15

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)

(machinist)

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.	Halifax	1/4/16	at H.M.T. "Olympic"
		Disembarked	Liverpool	1/4/16	
Transferred	74th Bn. C.E.F.	(H.Q. letter d. 25-5-1916)		28/5/1916	R.O. No. 128. P.T. d. 28-5/1916
		Proceeded overseas with		8/6/16	A.D. Armour, Major for Lt. Col.
11.6.16.	O.C. 71st Bn.	Landed in France & Taken on strength 74th Bn. C.E.F.		28/5/16	Commanding 74th O.S. Battalion, C. E. F. Pt. II 128. Auth. of C.E.F. 28/5/16.
29.5.16.	"	Left for Unit	Field.	10.6.16	J. A. B. at H.Q. 55/16 D.C.S. 178.
17.6.16	O.C. Unit	Joined Unit	Field	11.6.	16 B.213 D.C.S. 180.
5/9/16	98th Bn.	Adm. Discharge	98th Bn.	31/8/16	936 - 568221 - 29/9/16
25.9.16	2/1st So. Mid CCS.	DIED of wounds.		25.9.16	K.I. 137/1469, DCS 223, 2.10.16. Pt. 2 Ord 53, 2.10.16.

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

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				
					<i>[Signature]</i> Lieutenant for Lt Col. M.A.G.

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12.
20m.—11-15.
H. Q. 1772-39-819.

To Whom

Address

Rate

*Orpha Black**St. Marys,
Qnt.**\$15 00***APR 1 1916**

By Whom Assigned

Regtl. No.

Rank

Corps

*Black J. A.**126209**Pte.**71st Battr., B. Coy.*

PAYMENTS

REMARKS

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

Casualties

*Stop payments
Nov 1/16
"Died of wounds"
3rd 19/16 - 23/16*

*Died of wounds, Sept 25th 1916
Q. 15/- - 6 Oct 1916. A.P.*

1924

2

1924

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12a.
15m.—3-16.
H. Q. 1772-39-819.

Sheet No. 2. Orpha Black

L. L. Job 95618—M. & D. 6555.

PAYMENTS.

Name of Soldier

Black J. A.
"B" Coy. 71st. Bn.

126209

105 00

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	W 546	15	Casualties
May		J 5546	15	
June		P 8394	15	
July		D 8714	15	
Aug.		Q 11509	15	
Sept.		Y 16453	15	
Oct.		~~Z 16350~~	~~15~~	<i>Account closed / Cas.</i> <i>Nov chq 15⁰⁰ to adj for Oct.</i> <i>Acct closed Nov 1/16 JG</i> <i>Spec Reg 24/11/16</i> <i>105⁰⁰ EBX 9/17/4/17</i>
Nov.		X 27713	15	
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier.....

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

Surname
Black

Christian Name or Names
J.A.

Reg. No.
126209

Rank
Pte.

Unit
2nd C.M.R.

Co.

Troop

Batty

Hospital
2/1 South Midland C.C.Stat.

Date of Admission
25.9.16

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

Died of Wounds 25.9.16

DISPOSITION

Date

~~C.I. 6.10.16~~

A274(I)

REMARKS

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

at 2.

7011

13

Number 126209 Rank Lt.

Surname BLACK

Christian Name Jack A.

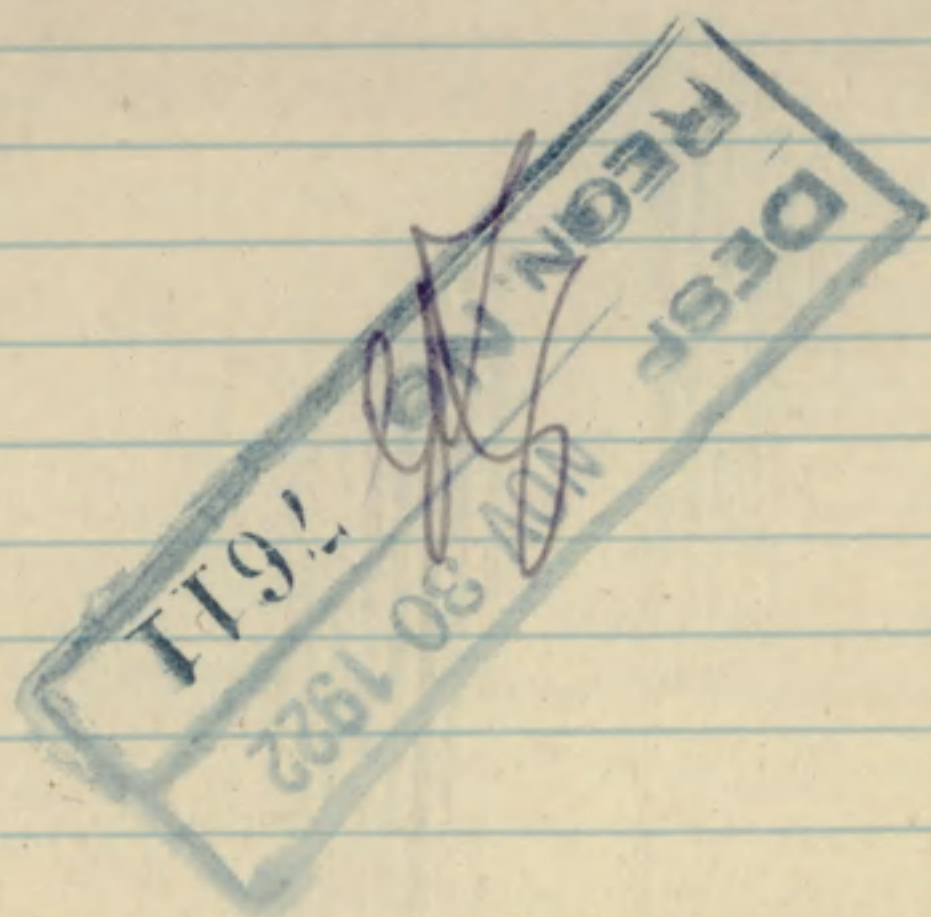
Units 2nd Inf. R. Theatre of War France.

Date of Service 8-6-16 D

Remarks (M) Mrs. John Black,

Latest Address Box 300
St. Mary's, Ont.

Roll No. Page 19570



No. 126209 RANK Pte.

NAME Black J. a.

T.O.S. 7-9-15 UNIT

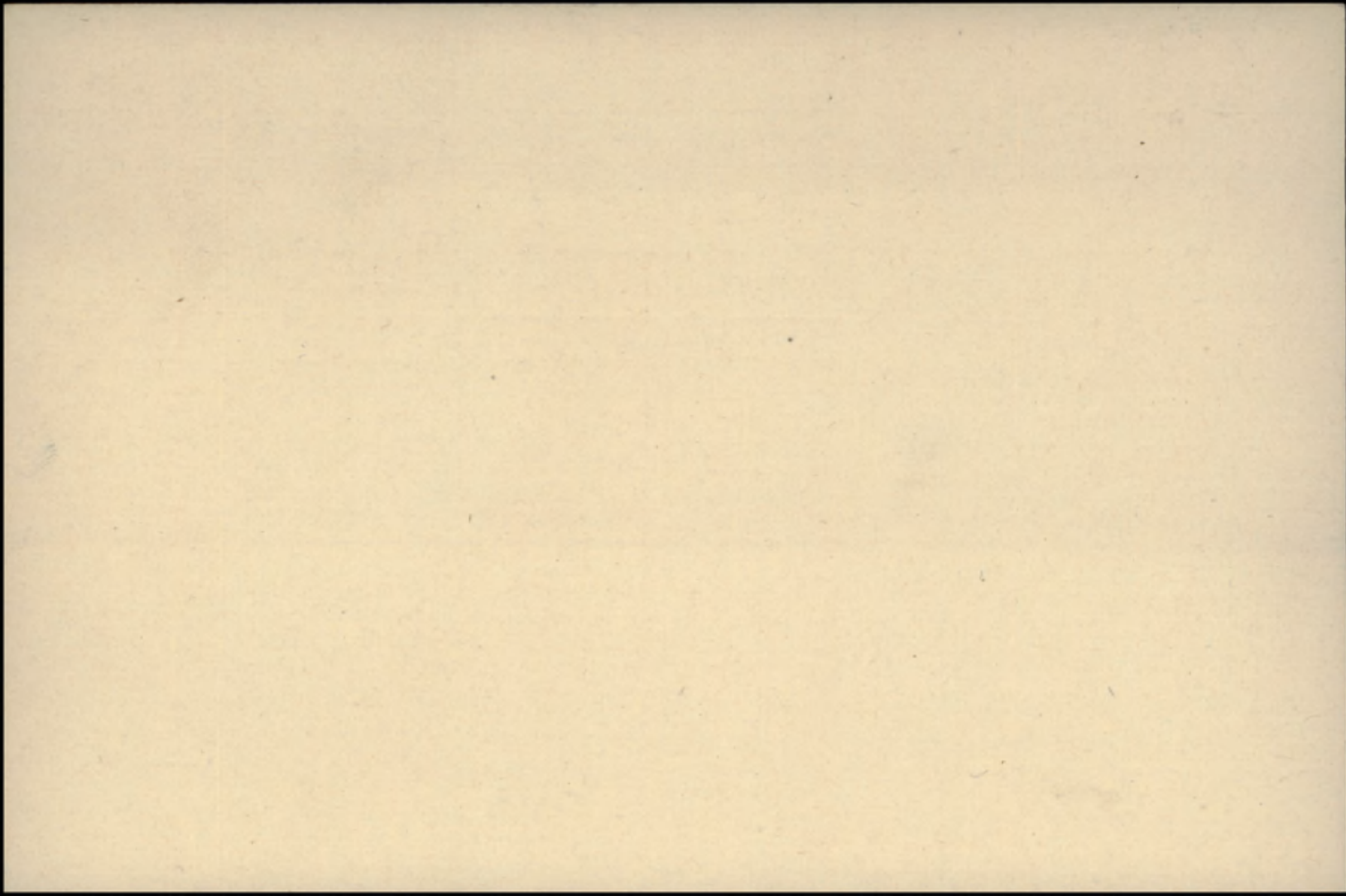
T.O.S. 7-9-15 UNIT 71 st Battalion C. E. I.
(D.O. no. 11 of 10-9-15)

M. D.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915- Sept 7	1915- Sept 30	✓		
	Oct.	✓		
	Nov.	✓		
	Dec	✓		
1916	1916-			
	Jan.	✓		
	Feb.	✓		
	Mar.	✓		
	April.	✓		
			A. W. L. from 3 rd to 6 th of Dec 1915.	D. O. no 86487

UNIT SAILED

APR 2 1916



Name *Black Jack* Rank *Private*

Reg. No. *126209*

Unit *2nd Batt C.M.R's*

25-b-2145

Next of Kin

Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
<i>25-9-16.</i>	<i>South Midland Bas bly Station</i>		<i>Not Stated</i>	<i>A274</i>	<i>2247</i> <i>5-10</i>	<i>6-10.</i>
	<u><i>DIED OF WOUNDS.</i></u>					
	<i>R.S. # 233.</i>	<i>23-10-16.</i>				

[illegible]

H.Q. 649-B-6513.

Black, Pte. Jack A., #126209, 2nd C.M.R. Bn.

M. & D. (Mother) Mrs. John Black,
St. Mary's, Ont. Box #300.

P. & S. (Father) John Black,
(address as above)

Mem. C. (Mother) Same as above.

Not elig. for star.
" " V.M.
" " B.W.M.

m.f.

JUN 2 1922
Scroll Desp. _____ Reqn. No. 47928
Plague Insp. 31 1922 Reqn. No. 45597
44192

703

M

742315 - JAN 22 1921

SURNAME.

Black. (649-B-6513)

CARD NO.

D

CHRISTIAN NAMES

Jack. A.

FOLL.

REGL. No. *126209*

RANK *Pte.*

UNIT

71st.

Batt.

FORMER CORPS

Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Black. John.

RELATIONSHIP TO SOLDIER

R. N. S.

ADDRESS

R.R. #2, St. Marys, Ont.

COUNTRY OF BIRTH

Canada. Owen Sound Ont.

DATE

Mar. 4th. 1895.

PLACE OF ATTESTATION

Stratford. Ont.

DATE

Sept. 7th. 1915.

Sailed from Halifax Per "S.S."

L. L. 94504. M. & D. 6512.

Olympic. 1-4-16.

*375
2*

M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

MARRIED

SINGLE

Yes.

WIDOWER

TRADE OR CALLING

Machinist

RELIGION

Presbyterian.

DESCRIPTION.

APPARENT AGE

20.

YEARS

6

MONTHS

HEIGHT

5-

FEET

4

INCHES

CHEST MEASUREMENT

36 1/2

INCHES

EXPANSION

2 1/2

INCHES

COMPLEXION

Medium

EYES

Blue

HAIR

Dark Brown.

DISTINGUISHING MARKS

*Scar Middle of forehead
Scar left side upper lip.*

MEDICAL EXAMINATION.

PLACE

Stratford, Ont

DATE

Sept. 7th. 1915.

NAME

H. Q. FILE No. 649-

RANK AND CORPS

REGT'L No.

CABLE

NATURE OF CASUALTY

NO.

DATE

02247	6-10-16	Died of wounds Sept 25th 1st South Midland Casualty Clearing Station
G F B 20904	2-10-16	Died of wounds rec'd in action 25-9-16 France or Belgium

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

A274 South Midland Gas Co.
Station

25-9-16

Died of wds not stated

[illegible]

REG'L NO. 126209 RANK Pte NAME Black, Jack A.

IF IN PERMT. CORPS
WHAT UNIT

UNIT 71st Bn TRANSFERRED TO 74th Bn DATE 11/6/16 AUTHORITY B.O. 128

PERMANENT FORCE ALLOWANCES TRANSFERRED TO 2nd Cmr. DATE 1/7/16 AUTHORITY (2nd Cmr) B.O. 128

PLACE OF ATTESTATION Stratford TRANSFERRED TO M. G. DATE 26/9/16 AUTHORITY C.O. 274

DATE OF ATTESTATION Sept 7/15 TRANSFERRED TO DATE 6/10/16 AUTHORITY

ASSIGNED PAY MONTHLY \$ 15.00 DATE EFFECTIVE 1/4/15

PAYABLE TO Orpha Black Est. Marys Ant. Cany. RELATIONSHIP

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) 9/10/16 EFFECTIVE 11/12/16 REASON Died of wounds

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) 26/9/16

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

[illegible]

Statement of
Feb 17-17
Account rendered
Cash paid in
effects No Rep.

[illegible][illegible]

P.T.O.

