NAME ARTHURS JAMES

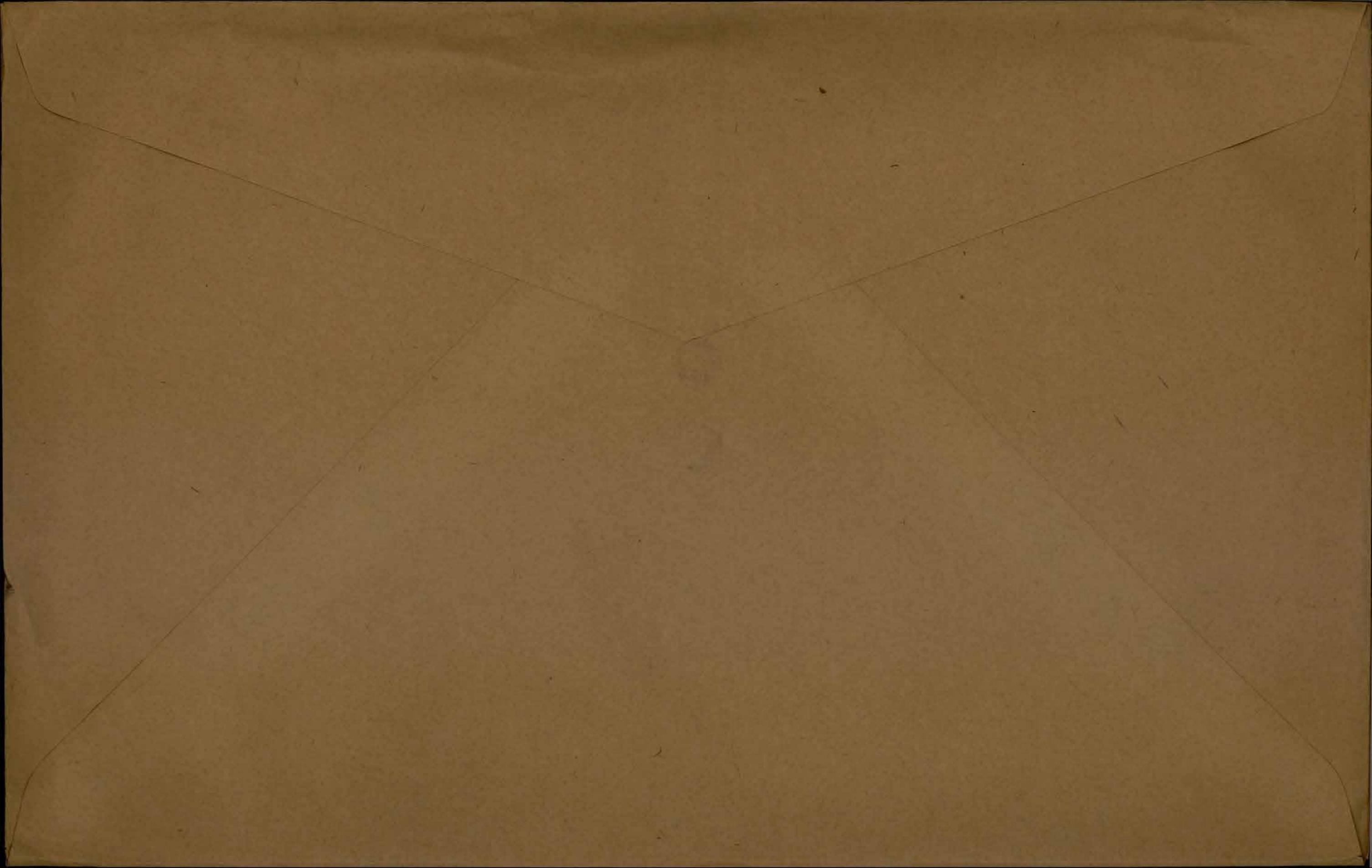
C.E.F. REGIMENTAL DOCUMENTS

REGT. No. 19682

UNIT 10 BN

H. Q. FILE No. X464

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133 or 51)			LEIS FELD		DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					CATEGORY
TRAINING HISTORY SHEET (M.F.W. 113)					DIED
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					26 -4 -15
REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A of A.F.B. 121)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)		F/TT)			DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					CATEGORY
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
MEDICAL EXAMINATION (M.F.W. 129)			1 to 22 - 14 - 14		
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)	ALPHANE TO				DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)	THE REAL PROPERTY.				
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
CARDS					
PAY-SHEETS					



# ORIGINAL.

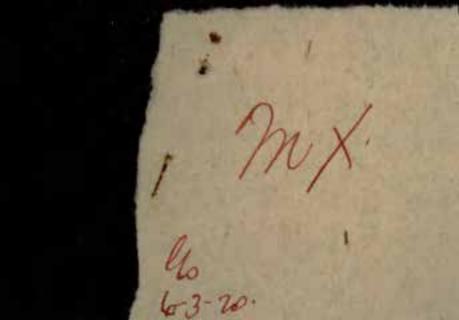
## ATTESTATION PAPER.

No. 19682

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT	BEFORE ATTESTATION.
1. What is your name 1 9682	Gallanswers).
2. In what Town, Township or Parish, and in	
what Country were you born?	Dungamen G. Lyhines Inlan
3. What is the name of your next-of-kin?	Mary grithing
4. What is the address of your next-of-kin?	Durgammi Co Tyrur duli
5. What is the date of your birth?	- Lower.
8. Are you willing to be vaccinated or re-	
vaccinated?	CYLD.
9. Do you now belong to the Active Militia?	MAS :
10. Have you ever served in any Military Force? If so, state particulars of former Service.	RZa 39=Batt Rans Shoon
11. Do you understand the nature and terms of your engagement?	YAP.
2. Are you willing to be attested to serve in the	Mis
CANADIAN OVER-SEAS EXPEDITIONARY FORCE?	ALEMUS (Signature of Man).
	Can (Signature of Witness).
	(Signature of Witness).
nade by me to the above questions are true, and nade, and I hereby engage and agree to serve in the obe attached to any arm of the service therein, for the termination of that war provided His Majes	BY MAN ON ATTESTATION.  do solemnly declare that the above answers that I am willing to fulfil the engagements by me now e Canadian Over-Seas Expeditionary Force, and the term of one year, or during the war now existing last longer than one year, and for six months after ty should so long require my services, or until legally
lischarged.	July (Signature of Recruit)
or lab	(Signature of Witness)
Date	(Signature of Witness)
	MAN ON ATTESTATION.
n duty bound honestly and faithfully defend His Ma Dignity, against all enemies, and will observe and ob and of all the Generals and Officers set over me. So	* /
***************************************	ATTHE (Signature of Recruit)
Date 26 20 1914.	(Signature of Witness)
CERTIFICATE C	OF MAGISTRATE.
The Recruit above-named was cautioned by more puestions he would be liable to be punished as provided The above questions were then read to the Recruit have taken care that he understands each quality entered as replied to, and the said Recruit has re-	e that if he made any false answer to any of the above ed in the Army Act. cruit in my presence. estion, and that his answer to each question has been nade and signed the declaration and taken the oath
pefore me, at	day of 1914.  (Signature of Justice)
I certify that the above is a true copy of the A	testation of the above-named Recruit.  (Approving Officer)

100 M.—8-14. H.Q. 1772-1-13.



### MEDICAL CASE SHEET.\*

No. in Admission	Regimental No.	Rank.	Surname.	Christian Name.
and	19689	PLO	arthur	Trues
Discharge Book	17012	-/-		
		Unit.		Age. Service.
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	10 -27001	ecker in		
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and Date.	Disease	cope .	21.2-200	A
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<sup>\*</sup> The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

- President Prints - Latternant Station and Date Water Comment of the · William 407.11 The state of the s

Surname. Approved by Examined Rank City or Town ..... Birthplace Fit or Unfit Date EXAMINED FOR RE-ENGAGEMENT, Apparent age M.O. Trade or occupation .M.O. Height.... Feet. Inches. M.O. Weight Lbs. Minimum..... inches. Chest measurement inches. Physical development Joo Oheum Small-Pox Marks.... Right. Left. Arm. Date. Result Vaccination Marks VACCINATIONS. Number..... 1910 M.O. When Vaccinated last /9/0 (a) Marks indicating congenital peculiarities or previous -----M.O. Morument Cease Fine on & Date ANTI-TYPHOID INCCULATIONS, ETC. Result (b) Slight defects but not sufficient to cause rejection 1904 one Well Ram 3. tattoars M.O. Enlisted on ..... CORFS. REGT'L NUMBER. HABITS. DATE. Transferred to.. .... EXAMINED OR DISCHARGED BY A MEDICAL BOARD. STATION. DATE. DISEASE. RESULT.

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

M. F. B. 313. 50M-8-14. H. Q. 1772-39-439. Entries in Red Ink made from Attestation Sheets.

JUN 14 1915 for D. D. M. S.

DATES OF Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations. Date of Arrival Number of days Signature Admission into Hospital. Discharge from Hospital. DISEASE. STATION. at the in Hospital. of Medical Officer. Station. Day Month Year Day Month Year Christian Name

#### Casualty Form-Active Service.

Regiment or Corps 10 # Ballacion Regimental No. 19682 Rank PH Name Mithuns, James Enlisted (a) 26/9/14 Terms of Service (a) Due year Service reckons from (a) 26 9 19 Date of promotion to Date of appointment Numerical position on to lance rank

To lance rank

Numerical position on roll of N.C.Os. Extended \_\_\_\_\_ Re-engaged \_\_\_\_ Qualification (b)\_ Report Record of promotions, reductions, transfers, Remarks casualties, etc., during active service, as taken from Army Form B. 213, Place reported on Army Form B, 213, Army Form Date From whom Army Form A. 36, or other Date A. 36, or in other official documents. The received official documents. authority to be quoted in each case. 22/4/15 - Q. F. 18213. OFFICER 1/2 RECORDS CANADIAN SECTION G. II. O. 26.4.15 6.6.2 426 for Colonel 1/0 Records Co

<sup>(</sup>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.

	Report	Record of promotions, reductions, transfers, casualties, etc., during active service, as	P. TERVILLE		Remarks
Date	From whom received	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	Army Form A. 36, or other official documents.
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			174-17-1	17	

ARTHURS James

Regimental No.

19682

Unit

10th Battalion

Date of enlistment

Sept.25,1914.

Place of birth

Ireland

Married (Yes or No)

No

If in Permanent Force

Name and Address of Next-of-kin

Miss Mary Arthurs

DUNGANNON C. Tyrone. Ireland

Date and place of discharge

Reason for discharge

Character on discharge

Promotions or appointments

NER. B. 4

Report		Record of promotions, reductions,		SOUR DE	Hay .		
Date	From whom received	transfers, casualties, etc., during active service. The authority to be quoted in each case	Place	Date	REMARKS Taken from Official Documents		
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26-7-15	1	Report missing		22-26/4/15	Part I 0. n° 22 24/4/15 N. N.K.		
14.5.16	orio	hes umed. to have		The same of			
		de cl.					
31-1-15	0.C. 10d	Forfeit 2 day pay. (Rw)	Lark Hill	24/1/15	PtII 0#845		

Rank and Manne Seminate de la companya de la compan the State Law I was a long to the law in the Report Record of promotions, reductions, transfers, casualties, etc, during active service. The authority to be quoted in each case. REMARKS
Taken from Official Documents Date Place From whom Date received Region last dit inerga. Children on duchnists Francoions of approments SHARP WILL BE STORY OF STREET

29247 THE MORTIMER SYSTEMS OTTAWA, CANADA

Regimental No.

Unit

10th Battalion Date of enlistment

Sept.26th, 1914.

Place of birth

Ireland

Married (yes or no)

No

Amount of pay assigned monthly \$

To whom payable

Name and address of next-of-kin

Miss Mary Arthurs,

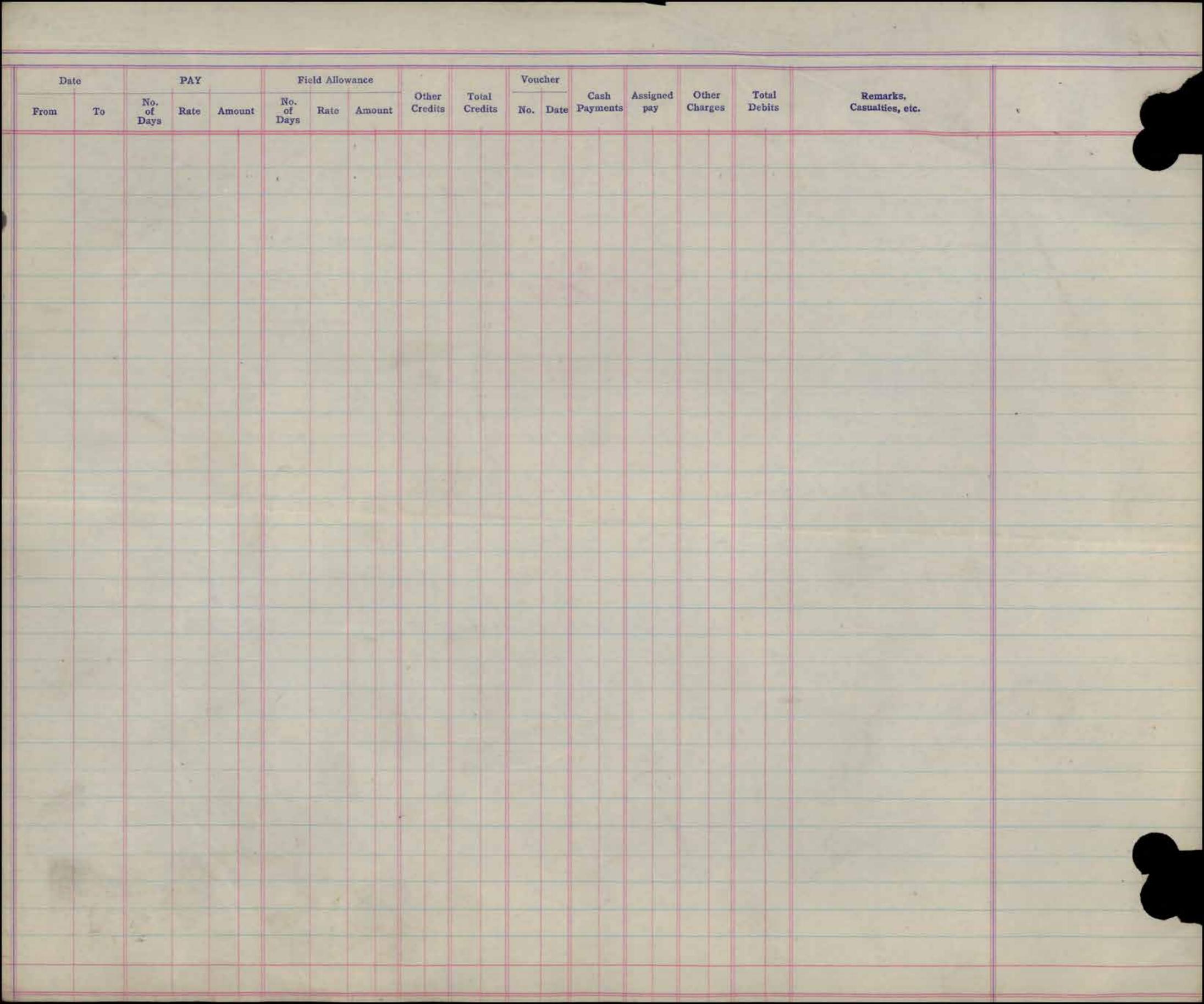
Dungannen, Co. Tyrone, Ireland.

Date and place discharged 26-4-15

Reason for discharge Off Dead

Character on discharge aff 14/8/16

									7								
	Da	te		PAY		Fi	eld Alloy	vance	O.I.	m	Vouci			4.5.5		22.1.5	
	From 1914	То	No. of Days	Rate	Amount	No. of Days	Rate	Amount	Other Credits	Total Credits	No.	Date Pa	Cash yments	Assigned	Other Charges	Total Debits	Remarks, Casualties, etc.
	Jep 22 Nove	Oct 31 Kov 30	40	1-1.	30	40	.10	- 2	29 -	44-		3	5 10			501	// · · · · · · · · · · · · · · · · · ·
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nesoch	July					-			150.	15600				7	7150		25 days Gredited
**	ang	The same of				1/4	State No	2000	405	8855						СН	EDISBUEN, E. BOX
	April 19	Cas.	a fo	und A	in	Acco	105 70	Different Cold	08/	6		8	8 55			88-84	SEP 8 1915
																	101 4258-196 4-17



el & Heandinavian 4-10-14 TRADE OR CALLING Laborer 33 YEARS APPARENT AGE FEET 9 INCHES HEIGHT CHEST MEASUREMENT 37 INCHES EXPANSION 3 INCHES COMPLEXION F'air EYES Brown HAIR Brown DISTINGUISHING MARKS COM. Star both shoulders. Monument Gease Tire on lest arm, 5 tattools In r. sorearm Statue (Caumpore ymviled) Right arm 3 tattools MEDICAL EXAMINATION. PLACE Valcartier, P. G. DATE Sep 4th 1914 Lesent address Not stated

ERNAME. (7 thurs (649-9-30)	CARD NO.
CHRISTIAN NAMES James W.	FOLL.
WIT 10th RANK Ptc.	
UNIT/Oth	Bw.
FORMER CORPS B. J. a. 39th By, 8470, 56days	
NEXT OF KIN.	CHANGE OF ADDRESS
NAMES IN FULL arthurs, Miss Mary	
RELATIONSHIP TO SOLDIER Mot stated of Jre.	
ADDRESS Dungannon Co. Tyrone, dre.	
PLACE OF ATTESTATION Valcartier, P. a. DATE	0 , 1880
PLACE OF ATTESTATION Valcartier, P. Q. DATE	Dep26th1914
4-10-14-10	
L. L. 94504. M. & D. 6512. M. F. W. 22. 250	м.—2-16. H. Q. 1772-39-339.

R. 149. Name Orthus The Rank 9 12 Reg. No. 19682 Unit 10 Buttation Next of Kin 95-01-293 List Notified Date Movement W.O. List Place Casualty No. N/K O. 26.4.15 Presimes Dead

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v.O. List	tified K.O.	I/N ON	List ON	Casualty	Расе	Movement		Date	

RANK AND CORPS Pto. 10 th Battalion NO. 849- 9230 frev. up missing now for offic. pulposes presumed to have died on or since M. F. W. 42-50m 7-15. L. L. Job 83225 -M. & D. 5842. H. Q. 1772-39-893.

		1	
LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
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119			Prev: represended, now rep mis.
Q426			Prev. sep. missing now
			for official burboses.
			for official purposes presumed to have
			die fon or since 26-4-15
			4-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0

Name Arthurs, J. Rank Pte. Reg. No. 19682. Unit 10th Battn. 25-4-293 Next of Kin Miss Mary Arthurs, Dungannon, Co. Tyrone, Ireland. No. Notified W.O. List Casualty Date Place Movement 21-5-15 Reported Wounded. 26-5-15 Frev. Rptd Wnded now Rptd Missing 119 Previously reported Missing now for official purposes presumed to have Died on or since 26-4-15. A426.

No. of the			10.70			3 5
W.O. List	Notified N/K O.	List I	Casualty	Place	Movement	Date
		7				

No: 19682 RANK Pte NAME arthurs & armes T. O. S. M. D. 10 PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PAID PAID SIG. OR FROM TO REC'T PARTICULARS AUTHORITY 1914 1914 aug 25 L aug 14 now showen on 10 this paylist Sept. 21 aug! 26. UNIT SAILED

40.00



Panel 4-H. A. Q ARTHURS, J. M. Pte. No. 19682, H. Q. 649-A-230/ Colig. for 1914-15 star Pte. 1072 BW. 4942 MEDAL, (Half-Sister) Mary Ann HARRIS, Woodhill, Newmills,
Dungannon, Co. Tyrone, Ireland, PLACQUES, (Half Sister) As above. Ser# 801919) the Sons address C/o J. W. Greaver ( Juandian) Sons address C/o J. W. Greaver ( Juandian) & Leeland.

NAME		REG. NO.		FILE NO.
DATE IN	DATE OUT	P.A. OR B.F.	DATE	REMARKS
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			2 40 2	
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Number 1968 T. H.U.R.S. Christian Names. Unit 10th Ancien Interneatre of war France. Remarks..... Latest Address . Mr. Harris. ..... To. J. M. Greaves Guardian Moodhill newmills Mangannon Syrone Co. Roll No. Ireland

9 38815 Berts MAR 2-1921

Reg. No. Christian Name or Names Surname 19682 athurs Co. Troop Batty. Rank 10 Batt Pte Date of Admission Hospital 8.11.14 Hosp. 13.11.14 Transferred To Net ley Hosp. 14-12, 121 Hosp. Diagnosis (2) (3) Additional Diagnoses: If more than one state present A.M.D. 2 DEPT. Bah. of D.G.M.S. O.M.F.C. London. DISPOSITION Date 25.11.14 REMARKS 26.7.15 Au 26 For off purposes presumed to have Dud on or sense 26.4.15

#### EPITOME OF HOSPITAL TREATMENT.

1	Hospital	Adm.
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3.		
4.	***************************************	(***********************
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Date			Brief details, and signatu	ire	
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		able iv.—;			
tion or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation
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tion or Troopship	Date of acrival or	Date of	Station or Troopship	arrival or	Date of departure or disembarkation
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	Date of arrival or embarkation	Date of departure or disembarkation		arrival or	departure or disembarkation

DUPLICATE.

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only.

Army Form B. 178<sup>A</sup> to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

SurnameArthurs		_Christian N	Vame	James		
	TABLE T-	-GENERAL	TARL	E		
Birthplace Parish News			County_		Island.	
	(on 1st			ember,		1014
Examined	on_lst atValca	rti or		one to the g		_1914
Declared A.	(at					
Declared Age			ears		days.	
Trade or Occupation		bourer	-			
Height	5	fe	et,	82	inches.	
Weight	150				lbs.	
Chest Girth when fully Expanded.	40				inches.	
(Range of Expansion.	2				inches.	
Physical Development	Good					
Vaccination Marks Arm		Ri	ght		Left	
Number	-				4	
When Vaccinated		1910				
Vision	$ \begin{cases} R.EV = \\ L.EV = \end{cases} $					
(a) Marks indicating con-	((a)					
genital peculiarities or	-	.0				
previous disease						
(h) Slight defects but not	((b)					
sufficient to cause	Non	10			1 2 1:	
rejection			17			
Approved by (Signature)						
(Rank)						
				*	Medical	Officer
	(at Winnip	eg, Aanit	oba.	***************************************		
Enlisted	6th		August			
	(on	day of	*****	*		191 4
oined on Enlistment		Corps.			Regtl. No.	
	lo C.W.				19682	
Transferred to	loth Ba	tt.				
Poor man and the state of	(			'		
Became non-effective by						
(COLONGE) S	on	day of				191 .
(Signature)			Correspo	nding Attestation	Paper, and entries	ared with
(Rank)			have bee	n taken from the	Attestation Paper.	made in
(7278.) Wt. 2869—1662, 200M. 5/15. J.	T. & S., Ltd.	Forms B. 1/8.	Col	W.J	R. WARD, P.	т.о.
			001	Canadian	Contingent	ords,

TAD! HUM

## Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

	Admi	Admitted to Hospital			ischarge Hospi	d from		Number	Remarks bearing on the same water	
Name of Hospital	Day			r Day	Hospital		Disease	of days in Hospital	Remarks 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
	8	1,1	14	1 25	11	14		17	Sprain, synovitis, & fracture. Reacted well to rest and	R. Cluison.
							Malleolus Lt.		plaster cast treatment.	Capt. A.M.C
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