

TRIPLICATE

ATTESTATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

No. A 19100
Folio. 144

QUESTIONS TO BE PUT BEFORE ATTESTATION.
(ANSWERS)

- 1. What is your name? *Percy Maughan*
- 2. In what Town, Township, or Parish, and in what Country were you born? *Toronto*
- 3. What is the name of your next-of-kin? *Mother Elizabeth Maughan*
- 4. What is the address of your next-of-kin? *1414 McArquette St*
- 5. What is the date of your birth? *8th Jan 1895*
- 6. What is your trade or calling? *Electrician*
- 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 Highland Cadets 1 year*
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 CANADIAN OVER-SEAS EXPEDITIONARY FORCE? *YES*

P. Maughan (Signature of Man.)
A. S. Hunter (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Percy Maughan*, 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.

Date *8th June* 1915 *P. Maughan* (Signature of Recruit.)
A. S. Hunter (Signature of Witness.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Percy Maughan*, 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.

Date *8th June* 1915 *P. Maughan* (Signature of Recruit.)
A. S. Hunter (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 *8th* day of *June* 1915
[Signature] (Signature of Justice.)

I certify that the above is a true copy of the Attestation of the above-named Recruit.
[Signature] (Approving Officer.)

DESCRIPTION OF Percy Maughan ON ENLISTMENT.

Apparent Age 21 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.

Height 5 ft. 8 ins.

(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.)

Chest measurement { Girth when fully expanded 33 3/4 ins.
 Range of expansion 2 1/2 ins.

2 Vac. marks.
Left arm.

Complexion Fair

Eyes Blue

Hair Light Brown

- Religious Denominations { Church of England
 Presbyterian
 Methodist
 Baptist or Congregationalist
 Other Protestants
(Denomination to be stated.)
 Roman Catholic
 Jewish

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 June 8th 1915

Place Montreal 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

Percy Maughan 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.

W. H. [Signature] (Signature of Officer.)

Date 191

20-11-18
C.P.

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.....

AFB 122.....

Will (Copy).....

MP
113-20

1 card

1 card

2 reg. bills

DISCHARGE DOCUMENTS

Name MAUGHAN, PERCY

Regt. No. 419100 Rank PTE

Corps 42nd BN.

DIED OF WOUNDS

6-6-16



R. O. No.....

H. Q. No.....



15054



44- 4
27-4
4-6

6055

SURNAME.

Maughan. 649-M-4849

CARD NO.

D
476

CHRISTIAN NAMES

Percy.

FOLL.

REGL. No.

419100.

RANK

Pte

UNIT

42nd

Bn.

FORMER CORPS

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Maughan, Mrs. Elizabeth

RELATIONSHIP TO SOLDIER

ADDRESS

*1414 Marquette St.
Montreal, P.Q.*

COUNTRY OF BIRTH

Canada.

DATE

PLACE OF ATTESTATION

Montreal, P.Q.

DATE

June 8th 1915.

015.10-16-12-102

11

From Montreal

Rev. S. S. Desjardins 10-6-16

MARRIED

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

Present Address-

Elig. for 1914-15 Star Pte 42nd Bn.

Maughan, P. Pte. #419100

MEDALS &

DECORATIONS. Mother- Mrs. E. Robinson,
1414 Margrette St., Montreal,
Que.,

42nd Bn.

P. & S. Mother- as above.

(Serial no. 768568.)

C. of S. Mother- as above

Desp MAY 19 1920 67973

3204

MS
Pmm

frag.
4935
✓
M

AUG 3 1921
Scroll Desp. _____ Reqn. No. 251452

NOV 11 1922
Plaque Desp. _____ Reqn. No. P47647

NAME

Maughan, Percy

REGT'L No.

419100

RANK AND CORPS

Pte

42nd Biv.

CABLE

NO.

DATE

NATURE OF CASUALTY

C.

NO.	DATE	NATURE OF CASUALTY
M8230	16-6-16	Died of wounds No 3 Casualty Clearing Station June 6 th 1916
A.7. B. Rowen	2090A 14-6-16	Died of wounds (G.S.W. face V and both arms) M3 Cas. Clear. Stat. June 6 th 1916

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

4183⁽¹⁾

No. 3 Can. Cas. Cl. Station

6-6-16

Died of Wds. G.S.M. Face
& Arms.

MM
M
Number. 419100 Rank. Pte. ~~B~~

Surname. MAUGHAN

Christian Name. Percy ~~X~~

Units. 42nd Bn Can Inf. Theatre of War. France

Date of Service. 9/10/15 II. -

Remarks. Mother

Latest Address Mrs. E. Robinson

1414. Marguerite St.

Roll No. B Page 78³³ Montreal Que.

DISP. OCT 27 1921

REGN. NO. GA 51777

No. 17100 RANK

Pte

NAME

Maughan P

T. O. S. 8-6-15

UNIT

June payroll 1/2nd Battalion

M. D.

4

PAID
FROMPAID
TOSIG.
OR
REC'T

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

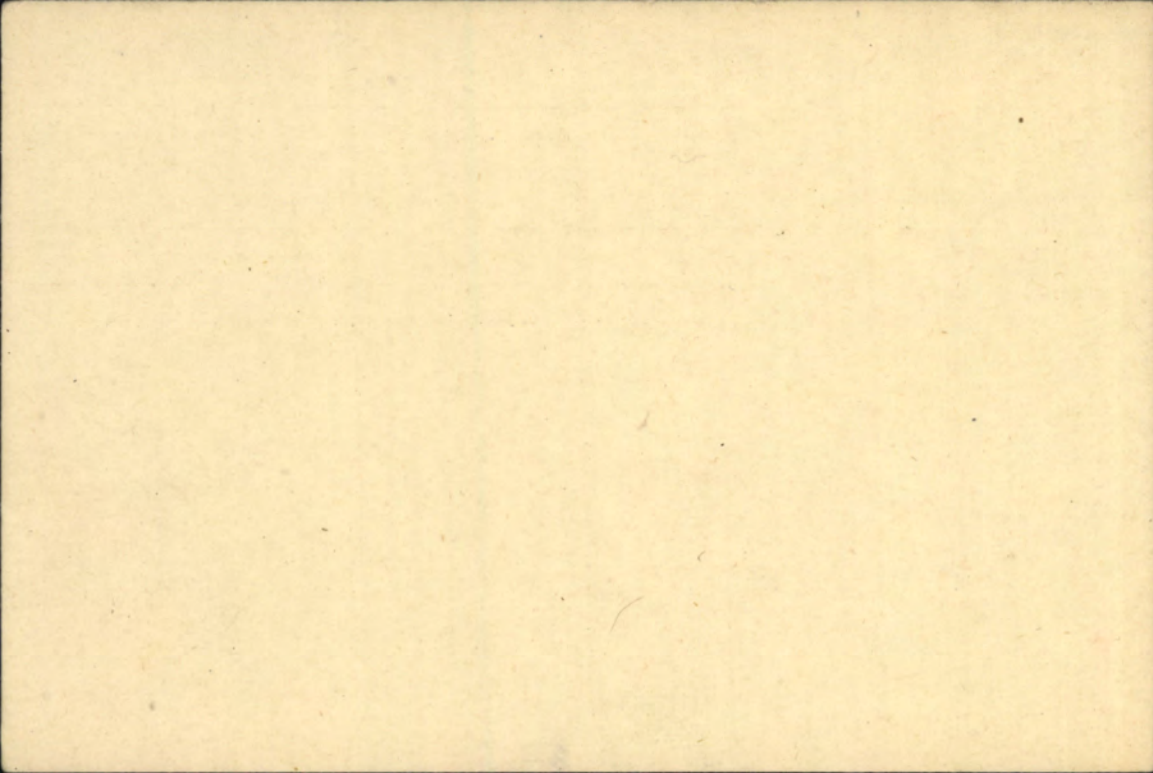
PARTICULARS

AUTHORITY

1915
June 81515
June 30

✓

UNIT SAILED
JUN 10 1915



Surname *Maughan.* Christian Name or Names *P.* Reg. No. *412100*
 Rank *Pte* Unit *42 Batt.* Co. Troop Batty.

Hospital *no 3 Gen. Casualty Co. Station* Date of Admission *6-6-16*

Transferred Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis *G. S. W. Face + Arms.*

(1) Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Died of Wounds. Date *6-6-16*

REMARKS

C. L. 17-6-16 4183.

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.

To be attached to Attestation Form.

Name Percy Mc aughan

Address 1414 Mc arquette St Montreal

Are you your parents' sole support (if an only son) Yes

1847

2

1847

1847

1847



Casualty Form—Active Service.

Regiment or Corps 42nd Bn: C.E.F.

Regimental No. 419100 Rank Plt. Name Maughan, Percy

Enlisted (a) June 1915 Terms of Service (a) d. of war + 6 mos. Service reckons from (a) _____

Date of promotion to } _____ Date of appointment } _____ Numerical position on } _____
 present rank } to lance rank } 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				
Dec 12/15	Plt 42nd Bn.	DISEMBARKED BOULOGNE 9 10 15 Died at 5 ²⁰ hrs from G.S.W. face of the enemy.	1103 Cam as Cpl Station	6-6-16.	N.R. C. 7037 d/10-6-16. P.I.O. No 24. d/24/16 <i>[Signature]</i> Col. A. A. G.
9/6/16.	Snd Cpl. C. Co. 42nd Bn.				

(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, Shoing 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				

Rank _____ Name **MAUGHAN Percy** Reg'l No. **A 19100**
 Unit **42nd Bn.** If in perm. Corps, }
 What Unit? } **Single.** Married or Single
 Place and Date of Enlistment **Montreal. 8th Jan. 1915.** ^{June} Place of Birth **Toronto.**
 Name and Address, Next-of-Kin **Elizabeth Maughan, 1414, Marguetta ST. Montreal.**
 Relationship **Mother**

Assigned Pay Monthly \$ _____ Payable to _____
 Relationship _____

Separation Allowance \$ _____ Payable to _____
 Relationship _____

Discharge, Date and Place _____ 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				
		Arrived	England.	19-6-15	
		Embarked for France.	Inverstone	9-10-15	
14.6.16	do	Dead of wounds.	Co's bar Car. Clearing Station.	6.6.16.	C.1. 2183. G.S. Co. free and comm.
14.6.16	do	Dead of wounds.	Field	6.6.16	HTIO #24.

Maughan
MEDICAL HISTORY SHEET.

Surname Maughan Christian Name Percy

Examined { on 8th day of June 1915
at Montreal

Approved by A. A. Mackay
Rank capt M.O.

Birthplace { City or Town Toronto
County Ont.

Apparent age 21 years 6 months

Trade or occupation Electrician

Height 5 Feet 8 Inches.

Weight 128 Lbs.

Chest measurement { Range 2 1/2 - 30 3/4 inches.
Minimum 2 1/2 inches.
Maximum expansion 2 1/2 inches.

Physical development good 33 1/4

Small-Pox Marks no

Vaccination Marks { Arm Right Left
Number 2

When Vaccinated last 1908

(a) Marks indicating congenital peculiarities or previous disease no

(b) Slight defects but not sufficient to cause rejection no

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

Date	Result	VACCINATIONS,
<u>3/8/15</u>		<u>A. A. Mackay</u> M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>16.6.15</u>		<u>500 Million A.A. Mackay</u> M.O.
<u>26.6.15</u>		<u>1000 do A.A. Mackay</u> M.O.
<u>6.7.15</u>		<u>1000 do A.A. Mackay</u> M.O.

Enlisted on 8th day of June 1915 at Montreal P.Q.

	CORPS.	REG'T NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>H 2nd Batt.</u> <u>6th F.</u>	<u>A 19100</u>		<u>June 8/15</u>
Transferred to.....		<u>419100</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.

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

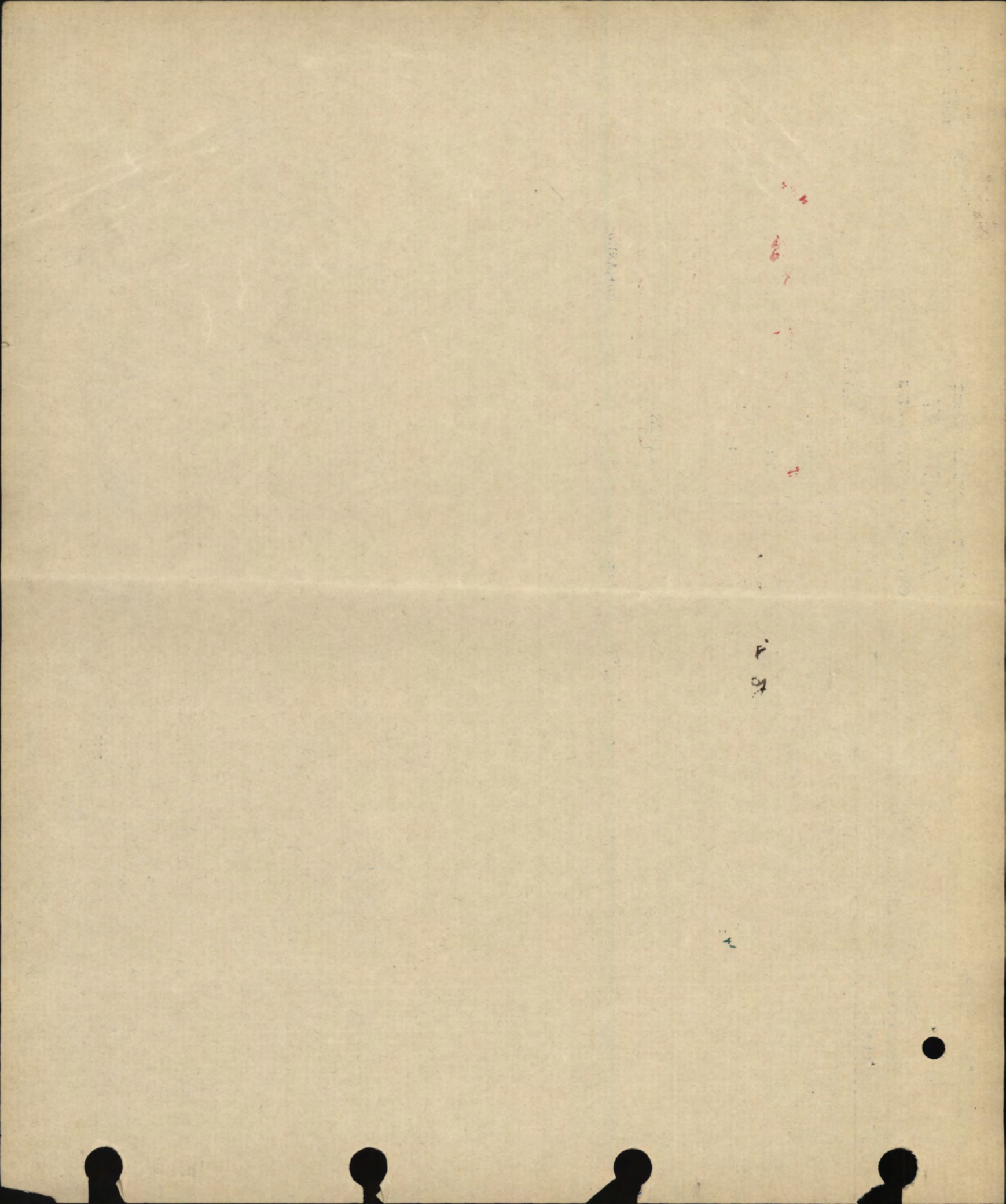
To Whom *Mrs E Maughan*
Address *1414 Marquette St.
Montreal, Que*

By Whom Assigned *Maughan Percy*
Regtl. No. *419100*
Rank *Pte*
Corps *D Coy. 42 Battalion*

Rate *\$ 20.⁰⁰/_{xx} Jan 1st 1916*

PAYMENTS *2 M. 28 ¹²/₁₅ B.*

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<div style="border: 2px solid red; padding: 5px; display: inline-block; margin-bottom: 10px;"> <i>Casualties</i> </div> <i>Died of wounds June 6/16. C.L. 17/6/16 J.H.G.</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916	<i>V10603</i>	<i>20-</i>	
Feb.		<i>L11639</i>	<i>20-</i>	
March		<i>P15529</i>	<i>20</i>	



MILITIA AND DEFENCE
ASSIGNED PAY

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

OVERSEAS CONTINGENTS

Sheet No. 2.

Mrs. E. Maughan

PAYMENTS.

Name of Soldier

Maughan, Percy.

L. L. Job 8902.-Req. 6213.

419100

Pte.

#2nd Bn. D. Coy

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>\$ 20⁰⁰</i>
April	1916	<i>1302</i>	<i>20</i>	<i>\$120.00 f.x. / 13-12-16 / AC.</i>
May		<i>12645</i>	<i>20</i>	
June		<i>103117</i>	<i>20</i>	
July				<i>Account closed Cas.</i>
Aug.				<div style="border: 2px solid red; padding: 10px; font-size: 2em; font-family: cursive;">Casualties</div>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

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MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1913			
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.				

Rank *Private* Name **MAUGHAN Percy** Reg'l No. **4 19100**
 Unit **42nd Bn.** If in perm. Corps, *X* What Unit? *0* Married or Single **Single**

Place and Date of Enlistment **Montreal. 8th Jan. 1915.** Place of Birth **Toronto.**

Name and Address, Next-of-Kin **Elizabeth Maughan, 1414, Marguetta St. Montreal.**

Assigned Pay Monthly \$ *11/16-* **20 00** Payable *to* **Mr. E. Maughan, 1414 Marguetta St Montreal**
 Relationship **Mother**
 Relationship *S.P. sent 19/6/16 - \$1/16*

Separation Allowance \$ Payable to Relationship

Discharge, Date and Place *6/6/16* Reason **Wied of Wounds** Character **bas list A 185**



Date		PAY		Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.	
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						
1915 July	July 31	31	1 00	31 00	31	10	3 10		34 10			24 34		5 00	179 34	4 76	clothing
Aug 1	Aug 31	31	1 00	31 00	31	10	3 10		34 10			36 50			36 50	2 36	
Sept 1	Sept 30	30	1 00	30 00	30	10	3 00		33 00			29 19		5 00	34 19	1 17	clothing
Oct 1	Oct 31	31	1 00	31 00	31	10	3 10		34 10			5 23			5 23	30 04	
Nov 1	Nov 30	30	1 00	30 00	30	10	3 00		33 00			11 60			11 60	51 44	
Dec 1	Dec 31	31	1 00	31 00	31	10	3 10	10	44 10			7 85			7 85	87 69	debites 66. Ref. p. 115
Jan 1	31	31	1 00	31 00	31	10	3 10		34 10			5 24 20			25 24	96 55	
Feb 1	29	29	1 00	29 00	29	10	2 90		31 90			5 23 20			25 23	103 22	
Mar 1	31	31	1 00	31 00	31	10	3 10		34 10			5 22 20			25 22	112 10	Checked J.H.
				275 -			27 50	10 -	312 50			190 40	60 - 10 =		200 40		Spotted see large sheet

BALANCE TRANSFERRED TO NEW LEDGER

Stat. Oct 27 1916 Account rendered

Cash found in effects *indep*

DUPLICATE

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only.
 Army Form B. 178^A to be used for Special Reserve recruits and
 Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname MAUGHAN Christian Name Percy

TABLE I.—GENERAL TABLE.

Birthplace ... Parish	<u>Toronto</u>	County	<u>Ont.</u>
Examined ...	on <u>8th</u> day of <u>June</u> 191 <u>5</u> .	at <u>Montreal</u>	
Declared Age ...	<u>21</u> years <u>6</u> months <u> </u> days.		
Trade or Occupation ...	<u>Electrician</u>		
Height ...	<u>5</u> feet, <u>8</u> inches.		
Weight ...	<u>128</u> lbs.		
Chest Measurement	Girth when fully Expanded.	<u>33½</u> inches.	
	Range of Expansion	<u>2½</u> inches.	
Physical Development ...	<u>Good</u>		
Vaccination Marks	Arm ...	Right	Left
	Number		<u>2</u>
When Vaccinated ...	<u>1908</u>		
Vision ...	R.E.—V= <u> </u>	L.E.—V= <u> </u>	
(a) Marks indicating congenital peculiarities or previous disease ...	(a) <u> </u>		
(b) Slight defects but not sufficient to cause rejection ...	(b) <u> </u>		
Approved by (Signature)	<u>A.A. Mackay,</u>		
(Rank)	<u>Capt.</u>		
	<i>Medical Officer.</i>		
Enlisted ...	at <u>Montreal, P.Q.</u>	on <u>8th</u> day of <u>June</u> 191 <u>5</u> .	
Joined on Enlistment ...	Corps.	Regtl. No.	
	<u>42nd Bn., C.E.F.</u>	<u>419100</u>	
Transferred to ...			
Became non-effective by			
	on <u> </u> day of <u> </u> 191 <u> </u> .		
(Signature)			
(Rank)			

FORM OF WILL.

I, Pte. P. Maughan.....(Name in full)
Regimental Number 419100.....serving in 42nd Batt......
of the Canadian Expeditionary Force, do hereby revoke all former Wills
by me made and declare his to be my last Will.

I bequeath all my real estate unto

.....Mrs. E. J. Robinson..... } Name & Address
.....1414 Marquette St...... } of person or
.....Montreal Que...... } persons to whom
..... } it is to go.

absolutely, and my personal estate I bequeath to

.....Mrs. E. J. Robinson..... } Name & Address
.....1414 Marquette St...... } of person or
.....Montreal Que...... } persons to receive
..... } personal estate*
..... } (see note).

In Witness whereof I have hereunto set my hand
this 27.....day of Feb......A.D. 1916.

.....Perey Maughan.....Signature.
Pte. 42nd Batt.

* N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in
the presence of us both 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.

Name of Witness.....George William Kennedy C.S.M.
Address of Witness.....42nd Bn. Canadian Army Corps
Occupation of Witness.....Company Sergeant Major
Name of Witness.....Godwin B. [unclear]
Address of Witness.....42nd Bn. Canadian Army Corps
Occupation of Witness.....Captain O. C. D'Arcy

