

ORIGINAL

72E

# ATTESTATION PAPER.

No.

Folio.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

1. What is your name?..... *Murphy Arthur*
  2. In what Town, Township or Parish, and in what Country were you born?..... *Johns Cove Nfld.*
  3. What is the name of your next-of-kin?..... *Mother - John Murphy*
  4. What is the address of your next-of-kin?..... *1583 St Hubert St Montreal*
  5. What is the date of your birth?..... *Aug 29 - 1892*
  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?..... *Yes*
  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 CANADIAN OVER-SEAS EXPEDITIONARY FORCE?..... *Yes*
- ..... (Signature of Man).  
*St Hubert St* (Signature of Witness).

### DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Arthur Murphy*, 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.

..... (Signature of Recruit)  
*Arthur Murphy*  
 Date *Sept 21* 1914. *St Hubert St* (Signature of Witness)

### OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Arthur Murphy*, 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.

..... (Signature of Recruit)  
*Arthur Murphy*  
 Date *Sept 21* 1914. *St Hubert St* (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 *22* day of *September*, 1914.

..... (Signature of Justice)  
*St Hubert St*

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

..... (Approving Officer)  
*St Hubert St*

early but

Description of Murphy Arthur on Enlistment.

Apparent Age 22 years ..... 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. 7 ins.

1 Vacc. mark on left arm

Chest measurement { Girth when fully expanded ..... 36 ins.

{ Range of expansion ..... 2 1/2 ins.

Complexion ..... Fair

Eyes ..... Blue

Hair ..... Brown

- Religions denominations. { Church of England.....
- { Presbyterian.....
- { Wesleyan.....
- { Baptist or Congregationalist.....
- { Other Protestants.....
- { (Denomination to be stated.) X
- { 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 ..... Aug 28 1914.

W. J. Macpherson  
Capt. R. M. C.

Place ..... Valcartier

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.

Arthur Murphy ..... 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. J. Macpherson (Signature of Officer)

Date Sept 22 1914.

# ATTESTATION PAPER.

No. 26106

Folio. X

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- What is your name?..... *Murphy Arthur*
- In what Town, Township or Parish, and in what Country were you born?..... *St John's Newfoundland*
- What is the name of your next-of-kin?..... *Brother John Murphy*
- What is the address of your next-of-kin?..... *15-93 St Hubert Montreal*
5. What is the date of your birth?..... *Aug 29<sup>th</sup> 1892*
6. What is your Trade or Calling?..... *Marine*
7. Are you married?..... *No*
- Are you willing to be vaccinated or re-vaccinated?..... *Yes*
8. Do you now belong to the Active Militia?..... *No*
9. 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 CANADIAN OVER-SEAS EXPEDITIONARY FORCE?..... *Yes*
- Arthur Murphy* (Signature of Man).
- J. McKeator Lt* (Signature of Witness).

### DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Murphy Arthur*, 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 *Sept 2* 1914. *Arthur Murphy* (Signature of Recruit)  
*J. McKeator Lt* (Signature of Witness)

### OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Murphy Arthur*, 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 *Sept 2* 1914. *Arthur Murphy* (Signature of Recruit)  
*J. McKeator Lt* (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 *St. John's* this *22* day of *September* 1914.

*[Signature]* (Signature of Justice)

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

*[Signature]* (Approving Officer)

2nd Bnt  
No 5  
Description of Murphy Arthur on Enlistment.

Apparent Age 22 years ..... 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. 7 ins.

1 Vacc. on left arm

Chest measurement { Girth when fully expanded ..... 36 ins.  
Range of expansion ..... 2 1/2 ins.

Complexion ..... Fair

Eyes ..... Blue

Hair ..... Brown

Religious denominations. { Church of England .....  
Presbyterian .....  
Wesleyan .....  
Baptist or Congregationalist .....  
Other Protestants .....  
(Denomination to be stated.)  
Roman Catholic ..... X  
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 ..... Aug 28 1914. W. H. Mackay

Place ..... Valcartier Capt. Mackay  
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.

Arthur Murphy ..... having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

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

Date ..... Sept 22 1914.

Mg. 3. 17-6-18.

- 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.....

(S)

18

(H)

Name MURPHY, Arthur.  
 Regt. No 26106 Rank Private.  
 Corps 14th-Bw. R. M. Co.  
 Held of Wounds. 4-5-15'

R. O. No.....  
H. Q. No.....

(H)

~~med 8/10/18~~  
Ret 8-10-19

~~cards, 1 Index Registered 15-1-18~~  
~~39634~~  
~~1 Part 11~~  
~~1 Casualty~~

47 — 1  
 28 — 1  
 7 . 1  
 1

480232

ad 03. 175 - 1  
 m. 4 03. 313 - 1  
 112 21257 - 1

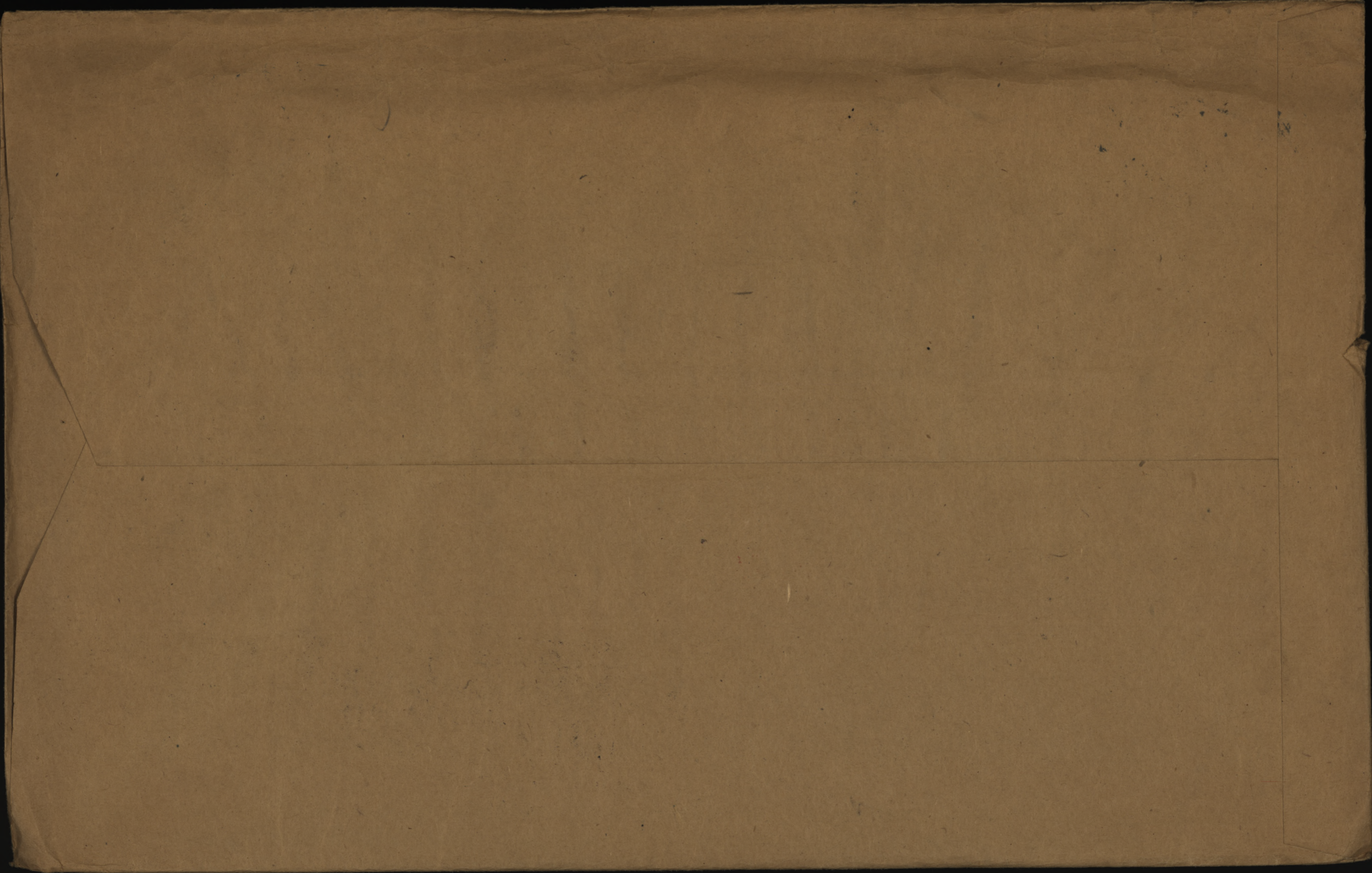
Mx 24 1/20

pay card

Card 122-1  
verified

(H)

PUBLIC ARCHIVES



SURNAME.

*Murphy*

CARD NO.

**D**

CHRISTIAN NAMES

*Arthur*

FOLL.

REGL. NO.

*26106*

RANK

*Pte.*

UNIT

*14th.*

*Rn.*

FORMER CORPS

*Nil.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*Murphy, John.*

RELATIONSHIP TO SOLDIER

*Brother.*

ADDRESS

*15-83 St. Hubert St., Montreal,  
P.Q.*

COUNTRY OF BIRTH

*Newfoundland*

*John's Cove.*

DATE

*Aug. 29<sup>th</sup>. 1892.*

PLACE OF ATTESTATION

*Valcartier., P.Q.*

DATE

*Sept. 22<sup>nd</sup> 1914.*

*0/S 4/10/14*

From Quebec per *S.S. Andania* 4/10/14.

MARRIED

SINGLE

*yes*

WIDOWER

TRADE OR CALLING

*Machinist*

RELIGION

*Roman Catholic*

DESCRIPTION.

APPARENT AGE

*22*

YEARS

MONTHS

HEIGHT

*5-*

FEET

*7*

INCHES

CHEST MEASUREMENT

*36*

INCHES

EXPANSION

*4 1/2*

INCHES

COMPLEXION

*fair*

EYES

*blue*

HAIR

*brown*

DISTINGUISHING MARKS

*1 scar. on left arm.*

MEDICAL EXAMINATION.

PLACE

*Valcartier, P.Q.*

DATE

*Aug. 23<sup>rd</sup> 1914*

*Present address: Not stated.*



a.m.

0161 FEB 23 1923

Number... 26106... Rank... Pte.

Surname... MURPHY

Christian Name... Arthur

Unit... 14th Bn. Can. Div. Theatre of War. France

Dates of Service... D

Remarks...

Latest Address... Vincent Murphy Esq. Father

Joh's Cove

Bay. Ste. Verde. Dist.

Newfoundland

Roll No.

B  
Page 386

L 41379 *epm*

AUG 4 1921

H. A. G.

649-M-347.

✓  
✓  
✓  
✓  
Murphy Arthur Pte. #26106-14th Bn.

Medals

& Dec. (father) Vincent Murphy, Esq.,

Job's Cove,  
Bay De Verde Dist.,  
Newfoundland.

P. & S. (father) ditto.

(Serial no. 768902.)

Mem. Cross. (nil) Mother, dead.

Not married.

16386

H. A. G.

W

JAN 19 1921

Scroll Desp. \_\_\_\_\_ Reqn. No. 711272

Plague Desp. \_\_\_\_\_ Reqn. No. P 29934

FEB 20 1922

NAME

Murphy, Arthur

REGT'L. No.

26106.

RANK AND CORPS

CABLE

NO.

DATE

14th Batt  
NATURE OF CASUALTY

NO.

2244

FOLL.

C. 920 9-5-15. wounded.

C. 935 9-5-15

Died of Wounds. 11 Gen. Hosp. Boulogne May 8<sup>th</sup> 15

A. F. B 2090 A. 14-8-15

" " " " " " " " May 4. 1915

A. F. B 2090 A.

Rouen 13-12-16

Died of wounds at No 11  
General Hospital, Camiers,  
May 7, 1915.

LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

L 53.	11 Gen. Boulogne	6.5.15.	S.S. W abdomen
V 54	11 Gen Boulogne	8.5.15	Died of Wounds S.S.W abdomen

No. 26106

RANK

Pte.

NAME

Murphy A.

T. O. S.

UNIT

3rd Regt (Victoria Rifles)  
(Active Service Mobilization)

M. D. 4

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914 Aug. 12 <sup>th</sup>	1914 Aug. 21 <sup>st</sup>	✓	no 14 <sup>th</sup> Ben. paylist	
" 25	Sept 21	✓		
Sept 22	Oct 31	✓		

UNIT SAILED  
OCT 3 1914





Name **Murphy, A.** Rank **Private**

Reg. No. **26106**

Unit **14th Battalion**

M 427

Next of Kin **Canada.**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
7.5						
6.5	No 11. G. Tp.	Boulogne.	G.W. abdomen	53	8/5	
8.5	Died of wounds.	"	"	54	10/5	



Surname

Christian Name or Names

Reg. No.

Murphy A.

26106

Rank

Unit

Co.

Troop

Batty.

Otc 14th Btn

Hospital

Boulogne. 11 General

Date of Admission

6.5.15

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

G.A.W. Abdomen

(1) Later Diagnosis (if changed)

(2)

(3)

Additional Diagnoses, if more than one state present

Died of Wounds

DISPOSITION

Date

C.L. 10575

C.P. 8.5.1553

REMARKS

Died of Wounds 8-5-15'

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

Casualty Form—Active Service.

Regiment or Corps 14 Canadian Bn R.M.R.

Regimental No. 26106 Rank Private Name Murphy Arthur

Enlisted (a) 22 Sept Terms of Service (a) Period of War Service reckons from (a) 22 Sept 1914

Date of promotion to } present rank } Date of appointment } to lance rank } Numerical position on } roll of N.C.Os. }

Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) \_\_\_\_\_

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B, 213, Army Form A, 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				

<u>8/5/15</u>	<u>11 Gentry</u>	<u>Died of Wounds</u>	<u>11 Gentry</u>	<u>11/5/15</u>	<u>113034/55</u>
---------------	------------------	-----------------------	------------------	----------------	------------------

*W. B. Brink*  
**CAPT. OFFICER IN CHARGE RECORDS CANADIAN SECTION G. H. Q.**

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

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				







MEDICAL CASE SHEET.\*

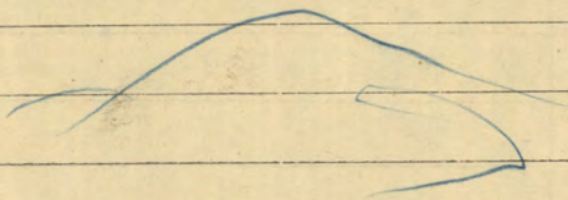
No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
8516	26106	Pvt	Murphy	A
Year	Unit.		Age.	Service.
1915	14 <sup>th</sup> Canadian		22	9/12
Station and Date.	Disease <u>GSW</u> <sup>bullet</sup> <u>Abdomen; Perforation of gut. Peritonitis</u>			
No 11 General Hospital Boulogne	wounded <u>1.5.15</u>			
4 <sup>th</sup> May.	wounded three days ago, bullet <sup>entry</sup> entering <u>Right loin</u> , <sup>exit</sup> emerging slightly <u>below the left of umbilicus</u> . Faecal discharge from wound in loin. Localised pain across epigastrium. frequent vomiting, bile stained material. No pain or tenderness in iliac fossae. No sign of fluid in peritoneum. urine normal. No action of bowels for three days. Ordered feeds & water. A.A. Stratton Lieut Rame.			
5 <sup>th</sup> May.	Vomit continues. Pain increased. cellulitis about External wound. <u>Laparotomy, suture of intestine</u> Operation Abdomen opened. Track lead to portion of small intestine which showed entrance & exit wound. Localised abscess. Wounds in gut closed. Catheter sewn above wounds to drain intestine. Abscess drained. <u>Gas.</u>			
6 <sup>th</sup> May.	General condition fair. Received by general. On one ounce feeds half hourly. Vomited at night <u>Gas</u>			
7 <sup>th</sup> May.	Condition worse. <u>Signs of obstruction.</u> Vomiting continues. Pulse gradually worse. <u>Died of Peritonitis</u> at 7.40 pm. A.A. Stratton Lieut Rame			

\*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Station  
and Date.

MEDICAL CASE SHEET

Regimental No.      Submarine      Name      Christian Name



NAME MURPHY, Arthur *Pte*

*0* ✓

Regimental No. **26106** Name and address of next-of-kin  
 Unit **14th Battalion** John Murphy, (brother)  
 Date of enlistment **Sept. 21st, 1914.** 1583, St. Hubert Street, Montreal.  
 Place of birth **Jobs Cove, Newfoundland**  
 Married (yes or no) **No** Date and place discharged **4/5/15**  
 Amount of pay assigned monthly \$ **3.00** Reason for discharge **Died of wounds**  
 To whom payable **nil** Character on discharge

*had sign. Auth. A.P. List 15<sup>23</sup>/3/16*

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.	
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						
1914																	
Sept 22	Oct 31	40	1.00	40 -	40	1.00	40 -		44 -	✓		35 -			35 -	✓	
Nov 1	Nov 30	30	1.00	30 -	30	1.00	30 -	9	42 -	✓		35			35	✓	
1/12/14	2/12/14	31	-	31 -	31	-	3 10	7	41 10	✓		35			35 -	✓	
1/1/15	3/1/15	31	-	31 -	31	-	3 10	6 10	40 20	✓					-		
2/2/15	28/2/15	28	-	28 -	28	-	2 80	40 20	71 -	✓		10			10 -	✓	
Mar 1	31/3/15	31	-	31 -	31	-	3 10	61 -	95 10	✓		8 -			8 -	✓	
Apr 1	30/4/15	30	-	30 -	30	-	3 -	87 10	120 10	✓		6 -			6 -	✓	
1/5/15	31/5/15	31	-	31 -	31	-	3 10	144 10	148 20	✓		129 -			-		
1/6/15	31/7/15	61	-	61 -	61	-	6 10	148 20	218 20	✓					92 40	92 40	Agreed = 84 days overpaid May to July.
								0 122 90		✓							
Dec.									3 44	126 34							Transfer to N.E. Branch
									126 34								440 440 Cas. Report: 54.
									121 94	121 94							1440 Credited date of death

Statement of  
MAR 27 1916  
Account rendered

N.E. March.

Cash found in effects nil

CHECKED BY *[Signature]*  
 DATE *4/5/15*  
 PAY OFFICE, N. E. BRANCH  
 SEP 31 1915  
 CANADIAN CONTINGENTS



Register No. *Am 1263*

WAR SERVICE GRATUITY  
TO  
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. *013341 a 23*

*h*  
*(Signature)*

Regt'l No. *26106* Name *Arthur Murphy*  
(Christian Name) (Surname)  
Unit *14<sup>th</sup> Bn* Rank *Pte* Date of enlistment  
Date of casualty *7-5-15* B.P.C. File No. *65386*  
Was service performed overseas? *yes*

DEPENDENT

Name *Mr V. Murphy* Relationship *father*  
Address *Jobs Cove, Bay de Verde,  
Newfoundland*

M.F.W. 2652  
23M-6-20,  
H.Q. 1772-89-1473

*Emb*

Amount of Special Pension Bonus \$ *nil* Abstracted by *J. Ramsay*

Eligible for Gratuity *Not Eligible* \$ *-*

Less amount of Special Pension Bonus paid \$

Less Debit Balance of S. A. or A.P. \$

Total deductions \$

Balance due \$

Cheque No. Date issued

REMARKS: *no. s.a. paid*

Clerk *at mevl*

Audited by  
Date

*10/21*

# POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname

Christian Name

Regimental Number

Rank

Address (in full)

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

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

L.I. 53901—M. & D. 9721

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

M. F. W. 127  
 300M-1-19  
 1772-39-1140

Remarks:

# DUPLICATE.

ARMY FORM B. 178.

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

## MEDICAL HISTORY of

Surname MURPHY Christian Name Arthur

TABLE I.—GENERAL TABLE.

Birthplace ... Parish \_\_\_\_\_ Jobs Core County Newfoundland

Examined ... { on 1st day of October 191<sup>4</sup>,  
 at SS. "Andania"

Declared Age ... 22 years ... days.

Trade or Occupation ... Machinist

Height ... 5 feet 8 inches.

Weight ... 147 lbs.

Chest Measurement { Girth when fully Expanded 35 inches.  
 Range of Expansion 2 inches.

Physical Development ... \_\_\_\_\_

Vaccination Marks { Arm ... Right Left  
 Number 2

When Vaccinated ... 1913

Vision ... { R.E.—V=  
 L.E.—V=

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

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

Approved by (Signature) D.A.C. Scringer  
 (Rank) Capt. A.M.C.  
Medical Officer.

Enlisted ... { at Valcartier  
 on 16th day of August 191<sup>4</sup>.

Corps.	Regtl. No.
<u>3rd. Vic. R.C</u>	<u>26106</u>
<u>14th. Battalion</u>	

Became non-effective by ... \_\_\_\_\_

This Medical History Sheet has been compared with the Corresponding Attestation Paper. W. R. WARR (Rank) \_\_\_\_\_  
 (4887.) W. 9597/1588, 500m. 9/15. C.P.F. 1915.









3252.

Rank and Name MURPHY Arthur

Regimental No. 26106

Unit 14th., Batt.

Date of enlistment Sept. 21st., 1914

Place of birth Newfoundland

Married (Yes or No) No

If in Permanent Force

Promotions or appointments

Name and Address of Next-of-kin

John Murphy (Brother)

1583 St. Hubert Street,

Montreal

Date and place of discharge

Reason for discharge

Character on discharge

*Died of wounds.*

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				
		Embarked.			
6/5/15	W.O. Adm. 11	Litton	Boulogne	8/5/15	Cas. list 53.
10/5/15	Ob. Noes.	<i>Died of wounds.</i>	"	10/5/15	Cas. list 54. Part II orders 19. Reported dies on 7/5/15 <i>Ottawa notified</i>
11/5/15	Senior Chaplain Boulogne Barr.	Buried at Military Cemetery	Boulogne Grave # 1943.	24/5/15	Burial Report.

*D.W. 1915*

*Count date 7-5-15*

Unit  
REMARKS  
Taken from Official Documents

Date of enlistment

Place of birth

Married (Yes or No)

If in Permanent Force

Promotions or appointments

Report

From whom received

Date

Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.

Place

Date

Name and Address of Next-of-Kin  
Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.

Report

From whom received

Date

*11/11/11*

REMARKS

Taken from Official Documents

*11/11/11*  
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